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# **Wisconsin Home Health Agency Directory 2003**

**October 2004**

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*Bureau of Health Information and Policy  
Division of Public Health  
Wisconsin Department of Health and Family Services*

**Suggested citation:**

Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy, *Wisconsin Home Health Agency Directory, 2003* (PPH 5378-03). October 2004.

## FOREWORD

Chapter 50.49, Wisconsin Statutes, authorizes and directs the Department of Health and Family Services (DHFS) to develop rules for the licensure of all home health agencies serving Wisconsin residents (Wisconsin Administrative Code, HFS 133, Home Health Agencies). These rules include requirements for reporting information on home health agencies to DHFS through the submittal of licensure application forms provided by the Department. The survey form is attached to the annual report. The Bureau of Health Information and Policy, DHFS, compiles the survey data for use by the Department and others.

The agency profiles presented in this directory are based on survey data collected for the 2003 calendar year. The annual report, to which the survey was attached, is for the period June 1, 2004 through May 31, 2005. The Bureau of Health Information and Policy would like to thank the home health agencies for their participation in the annual surveys.

Note: The Bureau of Health Information and Policy is a new bureau in the Division of Public Health. It comprises the former Bureau of Health Information (which was part of the Division of Health Care Financing) and selected policy staff from the Division of Public Health.

This directory was produced by the Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy. Jane Conner, research analyst, prepared the directory. She also coordinated and implemented the data collection and editing activities. Kitty Klement, research analyst, and Lu Ann Hahn and Kim Voss, research technicians, participated in the survey follow-up process. The directory was prepared under the supervision of Judith Nugent, chief of the Health Care Information Section. Susan Wood, Director, Bureau of Health Information and Policy, provided overall direction.

Inquiries concerning the information presented in this publication should be directed to the Bureau of Health Information and Policy, Division of Public Health, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309. You may telephone Jane Conner at (608) 267-9055 or e-mail her at [connejp@dhfs.state.wi.us](mailto:connejp@dhfs.state.wi.us).

All publications produced by the Bureau of Health Information and Policy can be found online, at <http://dhfs.wisconsin.gov/stats/>

To obtain a printed copy of this directory, please send a \$25.00 check (made payable to the Division of Public Health), along with a note requesting the 2003 Home Health Agency Directory, to the following address:

Division of Public Health  
Bureau of Health Information and Policy  
ATTN: Karen Leick  
P. O. Box 309  
Madison, WI 53701-0309



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## INTRODUCTION

Home health agencies have been an integral part of the Wisconsin health care delivery system since the early 1960s. The Wisconsin Annual Survey of Home Health Agencies was begun in 1984 to systematically collect information about the characteristics of home health agencies and the patients they served. The purpose of the survey is to generate information useful to various programs in the Department of Health and Family Services, home health agency administrators, public and private health care professionals, and other interested citizens.

This directory presents data for the 150 home health agencies that submitted an application for an annual report for 2003. Agency profiles include detailed information about individual home health agencies for 2003. The agency profiles are organized alphabetically by county of location, and by city within each county. The indices included at the back of this directory list all agencies statewide by county, city, name of agency, and license number assigned to each agency by the Bureau of Quality Assurance, Division of Disability and Elder Services.

Data contained in each profile are agency-specific and appear most frequently in the form of percentages. Caution should be used when comparing percentages for agencies with small numbers of patients because of the high potential for variability. Throughout these profiles, a " ." in any category indicates that the data were not provided by the agency.

The following information is presented for each agency:

1. Identifying information, including agency name, address, city, zip code, county, telephone number and license number.
2. Agency characteristics, such as type of ownership, certification for Medicare (Title 18) and Medicaid (Title 19), any affiliation with a hospital, and counties served by the agency.
3. Agency utilization measures, including the number of patients, visits and visits per patient by type of service.
4. Profiles of the percentage of patients served during the year, by patients' age, sex, reimbursement source and primary diagnosis. The profiles of the percentage of patients by age, sex and primary diagnosis describe an unduplicated count of patients served during calendar year 2003. The profile by reimbursement source is based on the agency's last completed fiscal year and describes a duplicated count of patients.
5. Revenue and expenses for the agency's last completed fiscal year.
6. The percentage of admissions by referral source and the discharge status or care destination for patients discharged.
7. Number of full-time equivalent employees (FTEs). Staffing data does not include information about consultants or contracted staff.

To assist the reader in converting the percentages shown in each profile to a comparable number of patients, an example is provided using data from the Heartland Home Health Care & Hospice in Green Bay (Page 6). To calculate the number of patients served by this agency who were age 65 to 74, divide the percentage for the age group (17.0) by 100 (.170) and multiply the result by the total number of patients served during the year (135). The product (.170 x 135) is 22.95, which when rounded to 23 is the number of unduplicated patients age 65 to 74 served by this agency during the 2003 calendar year.





## **Home Health Agency Profiles**



**Moundview Memorial Hospital and Clinics, Inc.**

450 East State Street

Adams WI 53910

Adams County

(608) 339-7076

**COUNTIES SERVED**

Adams

Juneau

Marquette

Waushara

Wood

License Number: 139

Ownership of Agency: Nonprofit Association

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 190

**TOTAL NUMBER OF ADMISSIONS** 238**PERCENT ADMISSIONS FROM:**

Private Residences	23.5%
General Hospitals	60.5
Nursing Homes	5.9
Other	10.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 242

**PERCENT DISCHARGES TO:**

Private Residences	49.2%
General Hospitals	19.0
Nursing Homes	11.6
Deaths	5.8
Other	14.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	190	1,388	7.3
Home Health Aide	79	854	10.8
Physical Therapy	68	511	7.5
Spch/Occ/Resp Therapy	37	145	3.9
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	100	3,503	35.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,401	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 76.5%
4 to 34 0.5	Medicaid 21.0
35 to 54 5.8	Other Federal 0.0
55 to 64 10.5	State Funds 0.0
65 to 74 22.6	Private Insurance 2.5
75 to 84 39.5	Self Pay 0.0
85 & over 21.1	Other 0.0
	TOTAL PATIENTS 238

Males 40.0% Females 60.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders	0.5%	Digestive Disorders	3.7%
Cancer	8.9	Genitourinary Sys.	4.2
Diabetes	4.7	Preg. & Childbirth	0.0
Diseases of Blood	0.5	Arthropathies	9.5
Dementia/Alzheimers	2.6	Osteopathies	2.1
Psychoses/Neuroses	1.6	Perinatal Period	0.0
Central Nervous Sys.	0.5	Ill-Defined Cond.	4.2
Paralysis/CP	0.5	Fractures	6.8
Cardiovascular	17.4	Wounds, Burns	1.1
Stroke	4.2	Compl. of Surgery	3.7
Respiratory	10.5	Other Conditions	12.6

**REVENUE**

Billings \$	482,337
Disallowances	94,562
Collections	387,775
Other	0
Total	387,775

**EXPENSES**

Total \$	418,899
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.7
Licensed Practical Nurses	0.0
Home Health Aides	0.8
Physical Therapists	0.2
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.5
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	9.4

**Bay Area Health LLC**

1601 Beaser Avenue  
Ashland WI 54806

Ashland County

**COUNTIES SERVED**

Ashland  
Bayfield  
Iron

(715) 682-9500

License Number: 251

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 208

**TOTAL NUMBER OF ADMISSIONS** 112

**PERCENT ADMISSIONS FROM:**

Private Residences	35.7%
General Hospitals	50.9
Nursing Homes	10.7
Other	2.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 101

**PERCENT DISCHARGES TO:**

Private Residences	60.4%
General Hospitals	28.7
Nursing Homes	4.0
Deaths	2.0
Other	5.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	112	1,754	15.7
Home Health Aide	22	549	25.0
Physical Therapy	13	132	10.2
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	254	57,299	225.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	169	62,742	371.3
TOTAL	XXXXXXX	122,476	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 18.8%
4 to 34 7.2	Medicaid 64.7
35 to 54 16.3	Other Federal 0.0
55 to 64 13.5	State Funds 0.0
65 to 74 12.5	Private Insurance 6.9
75 to 84 23.1	Self Pay 8.7
85 & over 27.4	Other 0.9
	TOTAL PATIENTS 218

Males 33.7% Females 66.3 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.0%	Digestive Disorders 3.4%
Cancer 5.3	Genitourinary Sys. 1.0
Diabetes 1.4	Preg. & Childbirth 0.0
Diseases of Blood 2.4	Arthropathies 13.9
Dementia/Alzheimers 5.3	Osteopathies 1.0
Psychoses/Neuroses 7.2	Perinatal Period 0.5
Central Nervous Sys. 2.9	Ill-Defined Cond. 7.7
Paralysis/CP 2.9	Fractures 2.4
Cardiovascular 10.1	Wounds, Burns 2.9
Stroke 4.8	Compl. of Surgery 0.5
Respiratory 4.8	Other Conditions 18.8

**REVENUE**

Billings \$	2,265,692
Disallowances	115,727
Collections	2,149,965
Other	32
Total	2,149,997

**EXPENSES**

Total \$	2,092,704
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.6
Licensed Practical Nurses	0.0
Home Health Aides	0.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	26.5
Homemakers	30.0
Other Staff	6.2
TOTAL FTES	67.9

**Lakeview Medical Center**

212 South Main Street  
Rice Lake WI 54868

Barron County

(715) 236-6256

License Number: 151

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 402

**COUNTIES SERVED**

Barron  
Calumet  
Polk  
Rusk  
Sawyer  
Washburn

**TOTAL NUMBER OF ADMISSIONS** 392

**PERCENT ADMISSIONS FROM:**

Private Residences	20.2%
General Hospitals	62.2
Nursing Homes	14.3
Other	3.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 402

**PERCENT DISCHARGES TO:**

Private Residences	78.1%
General Hospitals	10.7
Nursing Homes	1.2
Deaths	3.0
Other	7.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	402	3,409	8.5
Home Health Aide	163	3,097	19.0
Physical Therapy	218	1,306	6.0
Spch/Occ/Resp Therapy	66	213	3.2
Medical Social Service	13	21	1.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,046	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.2%	Medicare 79.5%
4 to 34 1.5	Medicaid 3.9
35 to 54 8.5	Other Federal 0.0
55 to 64 11.2	State Funds 0.0
65 to 74 22.6	Private Insurance 10.8
75 to 84 32.3	Self Pay 0.7
85 & over 22.6	Other 5.1
	TOTAL PATIENTS 415

Males 33.8% Females 66.2 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.7%	Digestive Disorders 2.2%
Cancer 10.9	Genitourinary Sys. 1.7
Diabetes 7.0	Preg. & Childbirth 0.2
Diseases of Blood 1.5	Arthropathies 18.2
Dementia/Alzheimers 0.0	Osteopathies 3.2
Psychoses/Neuroses 0.7	Perinatal Period 0.5
Central Nervous Sys. 1.2	Ill-Defined Cond. 5.7
Paralysis/CP 0.2	Fractures 10.0
Cardiovascular 13.7	Wounds, Burns 1.0
Stroke 4.2	Compl. of Surgery 5.2
Respiratory 6.5	Other Conditions 5.2

**REVENUE**

Billings \$	824,984
Disallowances	-92,330
Collections	917,314
Other	0
Total	917,314

**EXPENSES**

Total \$	889,074
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	6.1
Licensed Practical Nurses	0.0
Home Health Aides	3.0
Physical Therapists	1.0
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	11.2

**Bayfield County Health Department**

117 East 5th Street, PO Box 403

Washburn WI 54891

Bayfield County

**COUNTIES SERVED**

Bayfield

(715) 373-6109

License Number: 11

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 64

**TOTAL NUMBER OF ADMISSIONS** 56**PERCENT ADMISSIONS FROM:**

Private Residences	3.6%
General Hospitals	76.8
Nursing Homes	17.9
Other	1.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 58

**PERCENT DISCHARGES TO:**

Private Residences	87.9%
General Hospitals	1.7
Nursing Homes	5.2
Deaths	0.0
Other	5.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	54	629	11.6
Home Health Aide	25	441	17.6
Physical Therapy	30	237	7.9
Spch/Occ/Resp Therapy	12	81	6.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,388	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 86.2%
4 to 34 0.0	Medicaid 7.7
35 to 54 9.4	Other Federal 0.0
55 to 64 4.7	State Funds 0.0
65 to 74 23.4	Private Insurance 4.6
75 to 84 42.2	Self Pay 1.5
85 & over 20.3	Other 0.0
	TOTAL PATIENTS 65

Males 48.4% Females 51.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 7.8%		
Cancer 6.3	Genitourinary Sys. 4.7		
Diabetes 3.1	Preg. & Childbirth 0.0		
Diseases of Blood 1.6	Arthropathies 17.2		
Dementia/Alzheimers 1.6	Osteopathies 1.6		
Psychoses/Neuroses 0.0	Perinatal Period 0.0		
Central Nervous Sys. 0.0	Ill-Defined Cond. 15.6		
Paralysis/CP 0.0	Fractures 9.4		
Cardiovascular 14.1	Wounds, Burns 0.0		
Stroke 3.1	Compl. of Surgery 1.6		
Respiratory 3.1	Other Conditions 9.4		

**REVENUE**

Billings \$	135,277
Disallowances	17,550
Collections	117,727
Other	0
Total	117,727

**EXPENSES**

Total \$	231,388
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.1
TOTAL FTEs	4.6

**Bellin Home Health Agency**

617 South Roosevelt Street  
Green Bay WI 53401

Brown County

(920) 432-5434

License Number: 14

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 735

**COUNTIES SERVED**

Brown  
Calumet  
Door  
Kewaunee  
Manitowoc  
Marinette  
Oconto  
Outagamie  
Shawano

**TOTAL NUMBER OF ADMISSIONS** 630**PERCENT ADMISSIONS FROM:**

Private Residences 31.3%  
General Hospitals 58.7  
Nursing Homes 4.8  
Other 5.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 667

**PERCENT DISCHARGES TO:**

Private Residences 79.3%  
General Hospitals 0.9  
Nursing Homes 4.0  
Deaths 3.0  
Other 12.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	622	5,315	8.5
Home Health Aide	128	3,992	31.2
Physical Therapy	254	2,069	8.1
Spch/Occ/Resp Therapy	94	361	3.8
Medical Social Service	70	153	2.2
Private Duty Nursing	1	4	4.0
Personal Care/PC RN Supv.	34	1,707	50.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,601	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.8%	Medicare 66.3%
4 to 34 4.5	Medicaid 11.4
35 to 54 13.2	Other Federal 0.0
55 to 64 10.2	State Funds 0.0
65 to 74 18.2	Private Insurance 20.3
75 to 84 27.9	Self Pay 2.0
85 & over 21.2	Other 0.0
	TOTAL PATIENTS 735

Males 41.6% Females 58.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.8%	Digestive Disorders 2.0%
Cancer 6.3	Genitourinary Sys. 2.2
Diabetes 5.9	Preg. & Childbirth 0.4
Diseases of Blood 1.2	Arthropathies 5.6
Dementia/Alzheimers 0.5	Osteopathies 1.1
Psychoses/Neuroses 2.2	Perinatal Period 0.7
Central Nervous Sys. 2.9	Ill-Defined Cond. 11.3
Paralysis/CP 2.9	Fractures 4.2
Cardiovascular 18.5	Wounds, Burns 2.2
Stroke 2.4	Compl. of Surgery 6.1
Respiratory 3.9	Other Conditions 16.7

**REVENUE**

Billings \$ 1,606,431  
Disallowances 145,398  
Collections 1,461,033  
Other 47,653  
Total 1,508,686

**EXPENSES**

Total \$ 1,957,348

**STAFFING****FTEs**

Administrators 1.0  
Reg. Nurse Supervisors 2.6  
Registered Nurses 11.0  
Licensed Practical Nurses 0.5  
Home Health Aides 7.4  
Physical Therapists 1.4  
Occupational Therapists 0.0  
Speech Pathologists 0.0  
Respiratory Therapists 0.0  
Medical Social Workers 0.5  
Other Therapeutic Staff 0.6  
Personal Care Workers 0.0  
Homemakers 0.0  
Other Staff 3.6  
TOTAL FTEs 28.5

**Heartland Home Health Care & Hospice**  
 2050 Riverside Drive, 1st Floor  
 Green Bay WI 54301                      Brown County

(920) 436-9380

License Number: 218  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 135

**COUNTIES SERVED**

Brown  
 Calumet  
 Oconto  
 Outagamie  
 Shawano  
 Waupaca  
 Winnebago

**TOTAL NUMBER OF ADMISSIONS** 127

**PERCENT ADMISSIONS FROM:**

Private Residences	47.2%
General Hospitals	26.0
Nursing Homes	18.1
Other	8.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 119

**PERCENT DISCHARGES TO:**

Private Residences	81.5%
General Hospitals	4.2
Nursing Homes	3.4
Deaths	2.5
Other	8.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	127	1,054	8.3
Home Health Aide	34	1,027	30.2
Physical Therapy	24	155	6.5
Spch/Occ/Resp Therapy	13	32	2.5
Medical Social Service	21	42	2.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	6	25	4.2
Other Home Health Care	4	10	2.5
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,345	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.7%	Medicare 51.1%
4 to 34 7.4	Medicaid 9.6
35 to 54 13.3	Other Federal 0.0
55 to 64 13.3	State Funds 0.0
65 to 74 17.0	Private Insurance 31.9
75 to 84 17.8	Self Pay 7.4
85 & over 30.4	Other 0.0
	TOTAL PATIENTS 135

Males 42.2%      Females 57.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.7%	Digestive Disorders 5.9%		
Cancer 3.0	Genitourinary Sys. 11.9		
Diabetes 3.0	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 9.6		
Dementia/Alzheimers 0.7	Osteopathies 3.0		
Psychoses/Neuroses 0.7	Perinatal Period 0.0		
Central Nervous Sys. 5.2	Ill-Defined Cond. 5.2		
Paralysis/CP 1.5	Fractures 4.4		
Cardiovascular 12.6	Wounds, Burns 2.2		
Stroke 1.5	Compl. of Surgery 8.9		
Respiratory 5.2	Other Conditions 14.8		

**REVENUE**

Billings \$	278,518
Disallowances	60,247
Collections	218,271
Other	0
Total	218,271

**EXPENSES**

Total \$	345,325
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**STAFFING**

**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.0
Licensed Practical Nurses	0.1
Home Health Aides	2.4
Physical Therapists	0.0
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.1
Other Staff	2.0
TOTAL FTEs	8.0



**Home Care Advantage, Inc.**

120 South Webster Avenue  
Green Bay WI 54301

Brown County

**COUNTIES SERVED**

Brown

(920) 437-0496

License Number: 154

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 12

**TOTAL NUMBER OF ADMISSIONS** 2**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	50.0
Nursing Homes	0.0
Other	50.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 7

**PERCENT DISCHARGES TO:**

Private Residences	14.3%
General Hospitals	42.9
Nursing Homes	14.3
Deaths	0.0
Other	28.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	6	99	16.5
Home Health Aide	3	1,749	583.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	5	4,019	803.8
Medical Social Service	1	1	1.0
Private Duty Nursing	2	177	88.5
Personal Care/PC RN Supv.	3	111	37.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,156	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.3%	Medicare 0.0%
4 to 34 41.7	Medicaid 91.7
35 to 54 16.7	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 16.7	Private Insurance 8.3
75 to 84 8.3	Self Pay 0.0
85 & over 8.3	Other 0.0
	TOTAL PATIENTS 12

Males 50.0% Females 50.0 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 8.3
Diabetes 8.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 8.3
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 8.3	Fractures 8.3
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 58.3

**REVENUE**

Billings \$	1,403,037
Disallowances	263,220
Collections	1,139,817
Other	0
Total	1,139,817

**EXPENSES**

Total \$	1,137,793
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	11.4
Licensed Practical Nurses	4.2
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.6
Homemakers	0.0
Other Staff	3.9
TOTAL FTES	22.1

**Interim Healthcare of Northeastern Wisconsin, Inc.**

2555 Continental Court, #4

Green Bay WI 54311

Brown County

**COUNTIES SERVED**

Brown

Oconto

Outagamie

(920) 494-9444

License Number: 266

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 54

**TOTAL NUMBER OF ADMISSIONS** 27**PERCENT ADMISSIONS FROM:**

Private Residences	40.7%
General Hospitals	11.1
Nursing Homes	25.9
Other	22.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 25

**PERCENT DISCHARGES TO:**

Private Residences	32.0%
General Hospitals	20.0
Nursing Homes	16.0
Deaths	8.0
Other	24.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	43	3,898	90.7
Home Health Aide	23	7,424	322.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	3	939	313.0
Personal Care/PC RN Supv.	27	1,672	61.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,933	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.9%	Medicare 3.2%
4 to 34 16.7	Medicaid 66.7
35 to 54 24.1	Other Federal 0.0
55 to 64 13.0	State Funds 0.0
65 to 74 18.5	Private Insurance 7.9
75 to 84 18.5	Self Pay 7.9
85 & over 7.4	Other 14.3
	TOTAL PATIENTS 63

Males 46.3% Females 53.7 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.9%	Digestive Disorders 0.0%		
Cancer 3.7	Genitourinary Sys. 0.0		
Diabetes 14.8	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 3.7		
Dementia/Alzheimers 0.0	Osteopathies 0.0		
Psychoses/Neuroses 7.4	Perinatal Period 0.0		
Central Nervous Sys. 1.9	Ill-Defined Cond. 5.6		
Paralysis/CP 20.4	Fractures 0.0		
Cardiovascular 14.8	Wounds, Burns 1.9		
Stroke 5.6	Compl. of Surgery 0.0		
Respiratory 3.7	Other Conditions 14.8		

REVENUE	
Billings \$	1,128,514
Disallowances	346,287
Collections	782,227
Other	173
Total	782,400

EXPENSES	
Total \$	756,808

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.3
Registered Nurses	0.0
Licensed Practical Nurses	3.3
Home Health Aides	7.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.6
Homemakers	0.0
Other Staff	3.0
TOTAL FTES	17.8

**St. Vincent Hospital Home Health Care**

1920 South Libal  
Green Bay WI 54301

Brown County

(920) 448-7000

**COUNTIES SERVED**

Brown  
Kewaunee  
Oconto  
Outagamie  
Shawano

License Number: 35

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 2,424

**TOTAL NUMBER OF ADMISSIONS** 2,549**PERCENT ADMISSIONS FROM:**

Private Residences	34.0%
General Hospitals	65.9
Nursing Homes	0.0
Other	0.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 2,535

**PERCENT DISCHARGES TO:**

Private Residences	89.1%
General Hospitals	1.9
Nursing Homes	2.4
Deaths	1.5
Other	5.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2,263	13,318	5.9
Home Health Aide	82	9,945	121.3
Physical Therapy	993	7,358	7.4
Spch/Occ/Resp Therapy	383	6,187	16.2
Medical Social Service	221	748	3.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	166	7,490	45.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	17	1,063	62.5
TOTAL	XXXXXXX	46,109	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 40.3%	Medicare 36.8%
4 to 34 4.0	Medicaid 8.7
35 to 54 11.1	Other Federal 0.0
55 to 64 6.6	State Funds 0.0
65 to 74 8.7	Private Insurance 48.6
75 to 84 16.4	Self Pay 4.6
85 & over 12.9	Other 1.2
	TOTAL PATIENTS 2,424

Males 46.1% Females 53.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.8%	Digestive Disorders 2.0%		
Cancer 3.5	Genitourinary Sys. 3.4		
Diabetes 5.9	Preg. & Childbirth 0.1		
Diseases of Blood 1.2	Arthropathies 10.1		
Dementia/Alzheimers 0.0	Osteopathies 0.0		
Psychoses/Neuroses 3.2	Perinatal Period 38.7		
Central Nervous Sys. 4.2	Ill-Defined Cond. 5.7		
Paralysis/CP 0.8	Fractures 3.4		
Cardiovascular 9.8	Wounds, Burns 0.0		
Stroke 2.9	Compl. of Surgery 0.0		
Respiratory 0.0	Other Conditions 4.3		

**REVENUE**

Billings \$	4,962,170
Disallowances	790,665
Collections	4,171,505
Other	61,685
Total	4,233,190

**EXPENSES**

Total \$	4,482,913
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	6.0
Registered Nurses	12.8
Licensed Practical Nurses	0.4
Home Health Aides	7.1
Physical Therapists	6.0
Occupational Therapists	2.1
Speech Pathologists	2.2
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	1.4
Personal Care Workers	4.0
Homemakers	0.5
Other Staff	13.4
TOTAL FTES	57.4

**Visiting Nurse Association of Wisconsin**

931 Discovery Road  
Green Bay WI 54311

Brown County

(920) 288-5100

License Number: 1008

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 510

**COUNTIES SERVED**

Brown  
Calumet  
Door  
Milwaukee  
Sheboygan

**TOTAL NUMBER OF ADMISSIONS** 502**PERCENT ADMISSIONS FROM:**

Private Residences	63.3%
General Hospitals	32.1
Nursing Homes	2.8
Other	1.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 465

**PERCENT DISCHARGES TO:**

Private Residences	83.2%
General Hospitals	1.9
Nursing Homes	7.5
Deaths	3.9
Other	3.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	424	4,586	10.8
Home Health Aide	150	6,063	40.4
Physical Therapy	201	1,410	7.0
Spch/Occ/Resp Therapy	112	570	5.1
Medical Social Service	58	85	1.5
Private Duty Nursing	3	34	11.3
Personal Care/PC RN Supv.	108	5,534	51.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	5	236	47.2
TOTAL	XXXXXXX	18,518	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 7.5%	Medicare 57.5%
4 to 34 7.5	Medicaid 16.9
35 to 54 13.7	Other Federal 0.0
55 to 64 11.2	State Funds 0.0
65 to 74 17.6	Private Insurance 22.0
75 to 84 25.5	Self Pay 3.7
85 & over 17.1	Other 0.0
	TOTAL PATIENTS 510

Males 42.9% Females 57.1 %

PRIMARY DIAGNOSIS			
Infectious Disorders	0.2%	Digestive Disorders	3.5%
Cancer	5.1	Genitourinary Sys.	3.5
Diabetes	8.0	Preg. & Childbirth	0.0
Diseases of Blood	1.8	Arthropathies	12.4
Dementia/Alzheimers	0.8	Osteopathies	2.0
Psychoses/Neuroses	0.2	Perinatal Period	2.9
Central Nervous Sys.	2.9	Ill-Defined Cond.	1.0
Paralysis/CP	2.4	Fractures	5.7
Cardiovascular	15.1	Wounds, Burns	3.3
Stroke	3.1	Compl. of Surgery	6.7
Respiratory	4.3	Other Conditions	15.1

**REVENUE**

Billings	\$ 1,506,453
Disallowances	208,958
Collections	1,297,495
Other	794
Total	1,298,289

**EXPENSES**

Total	\$ 2,113,906
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	9.4
Licensed Practical Nurses	0.8
Home Health Aides	8.4
Physical Therapists	0.6
Occupational Therapists	0.5
Speech Pathologists	0.1
Respiratory Therapists	2.0
Medical Social Workers	1.6
Other Therapeutic Staff	2.2
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	6.0
TOTAL FTES	33.5

**Woodside Home Health Agency**

1040 Pilgrim Way  
Green Bay WI 54304

Brown County

**COUNTIES SERVED**

Brown  
Kewaunee

(920) 499-0975

License Number: 311

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 60

**TOTAL NUMBER OF ADMISSIONS** 32**PERCENT ADMISSIONS FROM:**

Private Residences	46.9%
General Hospitals	15.6
Nursing Homes	25.0
Other	12.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 21

**PERCENT DISCHARGES TO:**

Private Residences	57.1%
General Hospitals	19.0
Nursing Homes	0.0
Deaths	9.5
Other	14.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	47	1,358	28.9
Home Health Aide	22	5,880	267.3
Physical Therapy	7	66	9.4
Spch/Occ/Resp Therapy	2	23	11.5
Medical Social Service	0	0	0.0
Private Duty Nursing	2	315	157.5
Personal Care/PC RN Supv.	52	4,975	95.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	11	572	52.0
TOTAL	XXXXXXX	13,189	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 9.0%
4 to 34 16.7	Medicaid 32.8
35 to 54 15.0	Other Federal 0.0
55 to 64 6.7	State Funds 0.0
65 to 74 6.7	Private Insurance 1.5
75 to 84 15.0	Self Pay 47.8
85 & over 40.0	Other 9.0
	TOTAL PATIENTS 67

Males 35.0% Females 65.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 1.7	Genitourinary Sys. 0.0
Diabetes 5.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 6.7	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 20.0	Fractures 5.0
Cardiovascular 10.0	Wounds, Burns 0.0
Stroke 15.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 36.7

**REVENUE**

Billings \$	582,908
Disallowances	0
Collections	582,908
Other	484
Total	583,392

**EXPENSES**

Total \$	549,473
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.6
Licensed Practical Nurses	0.4
Home Health Aides	6.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.1
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	13.5

**Burnett County Department of Health and Human Services**

7410 County Road K, #280

Siren WI 54872

Burnett County

**COUNTIES SERVED**

Burnett

(715) 349-7600

License Number: 41

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 88

**TOTAL NUMBER OF ADMISSIONS** 77**PERCENT ADMISSIONS FROM:**

Private Residences	46.8%
General Hospitals	31.2
Nursing Homes	20.8
Other	1.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 79

**PERCENT DISCHARGES TO:**

Private Residences	70.9%
General Hospitals	7.6
Nursing Homes	13.9
Deaths	2.5
Other	5.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	88	608	6.9
Home Health Aide	31	1,107	35.7
Physical Therapy	25	98	3.9
Spch/Occ/Resp Therapy	9	14	1.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,827	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 36.7%
4 to 34 4.5	Medicaid 5.1
35 to 54 11.4	Other Federal 0.0
55 to 64 15.9	State Funds 0.0
65 to 74 15.9	Private Insurance 14.3
75 to 84 34.1	Self Pay 14.3
85 & over 18.2	Other 29.6
	TOTAL PATIENTS 98

Males 47.7% Females 52.3 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.1%	Digestive Disorders 1.1%		
Cancer 3.4	Genitourinary Sys. 2.3		
Diabetes 3.4	Preg. & Childbirth 0.0		
Diseases of Blood 1.1	Arthropathies 15.9		
Dementia/Alzheimers 3.4	Osteopathies 0.0		
Psychoses/Neuroses 4.5	Perinatal Period 0.0		
Central Nervous Sys. 6.8	Ill-Defined Cond. 5.7		
Paralysis/CP 0.0	Fractures 11.4		
Cardiovascular 10.2	Wounds, Burns 4.5		
Stroke 4.5	Compl. of Surgery 5.7		
Respiratory 3.4	Other Conditions 11.4		

**REVENUE**

Billings \$	188,389
Disallowances	35,158
Collections	153,231
Other	3,059
Total	156,290

**EXPENSES**

Total \$	205,274
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**STAFFING****FTES**

Administrators	0.4
Reg. Nurse Supervisors	0.0
Registered Nurses	1.4
Licensed Practical Nurses	0.0
Home Health Aides	0.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.7
TOTAL FTES	3.4

**Calumet County Health Dept/Home Health Care Agency**

206 Court Street, Courthouse

Chilton WI 53014

Calumet County

**COUNTIES SERVED**

Calumet

Fond du Lac

Manitowoc

(920) 849-1424

License Number: 42

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 169

**TOTAL NUMBER OF ADMISSIONS** 135**PERCENT ADMISSIONS FROM:**

Private Residences	39.3%
General Hospitals	28.9
Nursing Homes	25.9
Other	5.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 122

**PERCENT DISCHARGES TO:**

Private Residences	61.5%
General Hospitals	16.4
Nursing Homes	11.5
Deaths	2.5
Other	8.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	164	2,495	15.2
Home Health Aide	80	2,892	36.2
Physical Therapy	42	413	9.8
Spch/Occ/Resp Therapy	25	170	6.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	47	1,939	41.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,909	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 57.5%
4 to 34 0.0	Medicaid 15.5
35 to 54 0.6	Other Federal 11.0
55 to 64 3.0	State Funds 0.0
65 to 74 16.6	Private Insurance 5.0
75 to 84 41.4	Self Pay 11.0
85 & over 38.5	Other 0.0
	TOTAL PATIENTS 219

Males 38.5% Females 61.5 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 1.2	Genitourinary Sys. 2.4		
Diabetes 4.1	Preg. & Childbirth 0.0		
Diseases of Blood 0.6	Arthropathies 12.4		
Dementia/Alzheimers 1.2	Osteopathies 0.6		
Psychoses/Neuroses 3.0	Perinatal Period 0.0		
Central Nervous Sys. 12.4	Ill-Defined Cond. 7.7		
Paralysis/CP 0.0	Fractures 8.9		
Cardiovascular 20.1	Wounds, Burns 1.8		
Stroke 5.3	Compl. of Surgery 0.6		
Respiratory 4.1	Other Conditions 13.6		

REVENUE	
Billings \$	557,179
Disallowances	45,659
Collections	511,520
Other	18,237
Total	529,757

EXPENSES	
Total \$	537,041

**STAFFING FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	4.1
Licensed Practical Nurses	0.0
Home Health Aides	3.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.0
Homemakers	0.0
Other Staff	1.4
TOTAL FTES	9.9

**Chippewa County Department/Public Health**  
 711 North Bridge Street, Room 222  
 Chippewa Falls WI 54729 Chippewa County

**COUNTIES SERVED**  
 Chippewa

(715) 726-7900

License Number: 43  
 Ownership of Agency: County  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 357

**TOTAL NUMBER OF ADMISSIONS** 265

**PERCENT ADMISSIONS FROM:**

Private Residences	63.4%
General Hospitals	17.4
Nursing Homes	17.0
Other	2.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 254

**PERCENT DISCHARGES TO:**

Private Residences	64.6%
General Hospitals	5.5
Nursing Homes	20.5
Deaths	4.7
Other	4.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	325	4,111	12.6
Home Health Aide	148	5,783	39.1
Physical Therapy	65	720	11.1
Spch/Occ/Resp Therapy	11	89	8.1
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	217	7,817	36.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	18,520	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 47.1%
4 to 34 2.5	Medicaid 31.5
35 to 54 10.4	Other Federal 0.0
55 to 64 8.7	State Funds 0.0
65 to 74 19.3	Private Insurance 10.7
75 to 84 31.1	Self Pay 8.9
85 & over 28.0	Other 1.7
	TOTAL PATIENTS 403

Males 34.5% Females 65.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 3.1%
Cancer 0.0	Genitourinary Sys. 1.7
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 22.1
Dementia/Alzheimers 0.0	Osteopathies 0.6
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 25.8
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 16.5	Wounds, Burns 8.1
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 7.6	Other Conditions 14.0

**REVENUE**

Billings \$	1,194,153
Disallowances	90,003
Collections	1,104,150
Other	0
Total	1,104,150

**EXPENSES**

Total \$	1,128,875
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.1
Licensed Practical Nurses	0.0
Home Health Aides	4.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.6
Homemakers	0.0
Other Staff	4.0
TOTAL FTES	22.4



**St. Joseph's Hospital Home Health Agency**

2661 County Highway I

Chippewa Falls WI 54729

Chippewa County

(715) 726-3485

License Number: 158

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 634

**COUNTIES SERVED**

Barron

Buffalo

Chippewa

Clark

Dunn

Eau Claire

Pepin

Trempealeau

**TOTAL NUMBER OF ADMISSIONS** 640**PERCENT ADMISSIONS FROM:**

Private Residences 19.7%

General Hospitals 63.1

Nursing Homes 14.4

Other 2.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 643

**PERCENT DISCHARGES TO:**

Private Residences 80.9%

General Hospitals 2.2

Nursing Homes 6.5

Deaths 3.7

Other 6.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	568	5,424	9.5
Home Health Aide	121	2,387	19.7
Physical Therapy	270	2,039	7.6
Spch/Occ/Resp Therapy	141	567	4.0
Medical Social Service	99	178	1.8
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,595	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.1%	Medicare 71.1%
4 to 34 6.3	Medicaid 11.7
35 to 54 12.0	Other Federal 0.0
55 to 64 9.6	State Funds 0.0
65 to 74 19.4	Private Insurance 16.2
75 to 84 31.7	Self Pay 0.9
85 & over 18.9	Other 0.0
	TOTAL PATIENTS 634

Males 36.4% Females 63.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 5.4%	Digestive Disorders 4.6%
Cancer 8.7	Genitourinary Sys. 1.4
Diabetes 4.6	Preg. & Childbirth 0.0
Diseases of Blood 1.1	Arthropathies 12.5
Dementia/Alzheimers 0.2	Osteopathies 2.2
Psychoses/Neuroses 0.0	Perinatal Period 0.8
Central Nervous Sys. 1.1	Ill-Defined Cond. 7.4
Paralysis/CP 0.6	Fractures 5.4
Cardiovascular 14.0	Wounds, Burns 3.2
Stroke 4.1	Compl. of Surgery 6.2
Respiratory 6.8	Other Conditions 9.9

**REVENUE**

Billings \$	1,378,079
Disallowances	116,347
Collections	1,261,732
Other	5,659
Total	1,267,391

**EXPENSES**

Total \$	1,595,596
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	8.8
Licensed Practical Nurses	0.0
Home Health Aides	1.2
Physical Therapists	2.8
Occupational Therapists	0.3
Speech Pathologists	0.3
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.0
TOTAL FTES	19.1

**Memorial Hospital, Inc.**

216 Sunset Place  
Neillsville WI 54456

Clark County

**COUNTIES SERVED**

Clark  
Eau Claire

(715) 743-3101

License Number: 146

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 62

**TOTAL NUMBER OF ADMISSIONS** 47**PERCENT ADMISSIONS FROM:**

Private Residences	29.8%
General Hospitals	66.0
Nursing Homes	4.3
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 49

**PERCENT DISCHARGES TO:**

Private Residences	75.5%
General Hospitals	4.1
Nursing Homes	12.2
Deaths	6.1
Other	2.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	62	1,039	16.8
Home Health Aide	26	864	33.2
Physical Therapy	2	10	5.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,913	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 88.7%
4 to 34 1.6	Medicaid 3.2
35 to 54 4.8	Other Federal 0.0
55 to 64 4.8	State Funds 0.0
65 to 74 24.2	Private Insurance 6.5
75 to 84 24.2	Self Pay 1.6
85 & over 40.3	Other 0.0
	TOTAL PATIENTS 62

Males 33.9% Females 66.1 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 6.5	Genitourinary Sys. 0.0		
Diabetes 12.9	Preg. & Childbirth 0.0		
Diseases of Blood 3.2	Arthropathies 4.8		
Dementia/Alzheimers 0.0	Osteopathies 0.0		
Psychoses/Neuroses 0.0	Perinatal Period 1.6		
Central Nervous Sys. 3.2	Ill-Defined Cond. 0.0		
Paralysis/CP 0.0	Fractures 12.9		
Cardiovascular 30.6	Wounds, Burns 16.1		
Stroke 1.6	Compl. of Surgery 0.0		
Respiratory 4.8	Other Conditions 1.6		

**REVENUE**

Billings \$	157,848
Disallowances	-58,752
Collections	216,600
Other	0
Total	216,600

**EXPENSES**

Total \$	214,721
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTES	3.8

**Divine Savior Home Care**

2817 New Pinery Road, PO Box 387  
Portage WI 53901 Columbia County

(608) 745-6400

License Number: 328  
Ownership of Agency: Nonprofit Church  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 315

**COUNTIES SERVED**

Adams  
Columbia  
Dane  
Green Lake  
Juneau  
Marquette  
Sauk

**TOTAL NUMBER OF ADMISSIONS** 293

**PERCENT ADMISSIONS FROM:**

Private Residences	17.4%
General Hospitals	59.4
Nursing Homes	17.7
Other	5.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 293

**PERCENT DISCHARGES TO:**

Private Residences	72.4%
General Hospitals	3.4
Nursing Homes	9.9
Deaths	4.8
Other	9.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	307	2,820	9.2
Home Health Aide	70	739	10.6
Physical Therapy	201	1,412	7.0
Spch/Occ/Resp Therapy	173	847	4.9
Medical Social Service	8	9	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,827	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 82.1%
4 to 34 1.3	Medicaid 3.4
35 to 54 7.0	Other Federal 0.0
55 to 64 12.7	State Funds 0.0
65 to 74 18.1	Private Insurance 13.9
75 to 84 31.1	Self Pay 0.3
85 & over 29.8	Other 0.3
	TOTAL PATIENTS 352

Males 38.1% Females 61.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.3%	Digestive Disorders 4.1%		
Cancer 4.4	Genitourinary Sys. 2.9		
Diabetes 2.2	Preg. & Childbirth 0.0		
Diseases of Blood 1.0	Arthropathies 14.3		
Dementia/Alzheimers 0.0	Osteopathies 2.2		
Psychoses/Neuroses 0.3	Perinatal Period 0.0		
Central Nervous Sys. 1.3	Ill-Defined Cond. 7.6		
Paralysis/CP 0.0	Fractures 10.8		
Cardiovascular 15.9	Wounds, Burns 2.9		
Stroke 3.8	Compl. of Surgery 2.2		
Respiratory 9.5	Other Conditions 13.3		

**REVENUE**

Billings \$	595,572
Disallowances	10,999
Collections	584,573
Other	0
Total	584,573

**EXPENSES**

Total \$	489,147
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.1
Licensed Practical Nurses	1.0
Home Health Aides	1.3
Physical Therapists	0.8
Occupational Therapists	1.0
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	1.2
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.5
TOTAL FTES	10.1

**Prairie du Chien Memorial Hospital Home Health**  
 705 East Taylor Street  
 Prairie du Chien WI 53821      Crawford County

**COUNTIES SERVED**  
 Crawford  
 Grant

(608) 357-2262

License Number: 46  
 Ownership of Agency: Nonprofit Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 273

**TOTAL NUMBER OF ADMISSIONS** 294

**PERCENT ADMISSIONS FROM:**

Private Residences	24.5%
General Hospitals	72.4
Nursing Homes	3.1
Other	0.0

**TOTAL NUMBER OF DISCHARGES**  
 (Including Deaths) 278

**PERCENT DISCHARGES TO:**

Private Residences	75.5%
General Hospitals	9.7
Nursing Homes	5.4
Deaths	2.5
Other	6.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	272	3,793	13.9
Home Health Aide	88	1,441	16.4
Physical Therapy	54	273	5.1
Spch/Occ/Resp Therapy	48	350	7.3
Medical Social Service	24	59	2.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,916	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.4%	Medicare 82.4%
4 to 34 1.5	Medicaid 5.8
35 to 54 7.3	Other Federal 0.0
55 to 64 7.7	State Funds 0.0
65 to 74 24.5	Private Insurance 11.5
75 to 84 30.8	Self Pay 0.0
85 & over 23.8	Other 0.4
	TOTAL PATIENTS 278

Males 41.4%      Females 58.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.7%	Digestive Disorders 1.8%		
Cancer 5.1	Genitourinary Sys. 0.7		
Diabetes 6.2	Preg. & Childbirth 0.0		
Diseases of Blood 1.8	Arthropathies 11.0		
Dementia/Alzheimers 0.0	Osteopathies 5.9		
Psychoses/Neuroses 0.0	Perinatal Period 3.7		
Central Nervous Sys. 0.7	Ill-Defined Cond. 5.9		
Paralysis/CP 0.4	Fractures 4.8		
Cardiovascular 25.6	Wounds, Burns 1.5		
Stroke 4.0	Compl. of Surgery 3.3		
Respiratory 8.1	Other Conditions 8.8		

REVENUE	
Billings \$	785,246
Disallowances	71,357
Collections	713,889
Other	400
Total	714,289

EXPENSES	
Total \$	910,436

STAFFING	FTES
Administrators	0.1
Reg. Nurse Supervisors	1.5
Registered Nurses	7.1
Licensed Practical Nurses	0.0
Home Health Aides	2.2
Physical Therapists	0.2
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.1
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.6
TOTAL FTES	13.9

**Catalyst, Inc.**

222 North Midvale Boulevard, Suite 3  
 Madison WI 53705                      Dane County

**COUNTIES SERVED**

Dane  
 Rock

(608) 238-8119

License Number: 316  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 33

**TOTAL NUMBER OF ADMISSIONS** 12

**PERCENT ADMISSIONS FROM:**

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2	22	11.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	63	6,532	103.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,554	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.0%	Medicare 0.0%
4 to 34 97.0	Medicaid 100.0
35 to 54 0.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 0.0	Private Insurance 0.0
75 to 84 0.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 33

Males 60.6%      Females 39.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 30.3	Perinatal Period 3.0
Central Nervous Sys. 12.1	Ill-Defined Cond. 3.0
Paralysis/CP 21.2	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 30.3

**REVENUE**

Billings \$	584,826
Disallowances	37,594
Collections	547,232
Other	0
Total	547,232

**EXPENSES**

Total \$	457,290
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	22.6
Homemakers	0.0
Other Staff	0.5
TOTAL FTES	24.3

**Home Health United - VNS**

4801 Hayes Road  
Madison WI 53704

Dane County

(608) 242-1516

License Number: 176

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 3,855

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	3,855	43,144	11.2
Home Health Aide	953	22,905	24.0
Physical Therapy	2,269	16,529	7.3
Spch/Occ/Resp Therapy	943	5,813	6.2
Medical Social Service	820	1,938	2.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	6	596	99.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	90,925	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.4%	Medicare 73.2%
4 to 34 3.4	Medicaid 3.8
35 to 54 11.3	Other Federal 0.0
55 to 64 11.8	State Funds 0.0
65 to 74 18.5	Private Insurance 22.0
75 to 84 31.5	Self Pay 1.0
85 & over 21.1	Other 0.0
	TOTAL PATIENTS 3,889

Males 39.5% Females 60.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.3%	Digestive Disorders 4.1%
Cancer 5.9	Genitourinary Sys. 3.1
Diabetes 4.2	Preg. & Childbirth 0.2
Diseases of Blood 0.9	Arthropathies 24.1
Dementia/Alzheimers 0.6	Osteopathies 1.3
Psychoses/Neuroses 0.5	Perinatal Period 0.2
Central Nervous Sys. 2.1	Ill-Defined Cond. 4.8
Paralysis/CP 0.4	Fractures 6.2
Cardiovascular 13.7	Wounds, Burns 1.9
Stroke 2.7	Compl. of Surgery 2.0
Respiratory 5.3	Other Conditions 14.4

**COUNTIES SERVED**

Adams  
Columbia  
Dane  
Dodge  
Grant  
Green  
Green Lake  
Iowa  
Jefferson  
Juneau  
Marquette  
Monroe  
Richland  
Rock  
Sauk  
Vernon  
Walworth

**TOTAL NUMBER OF ADMISSIONS** 3,839**PERCENT ADMISSIONS FROM:**

Private Residences	0.2%
General Hospitals	81.9
Nursing Homes	16.6
Other	1.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 3,837

**PERCENT DISCHARGES TO:**

Private Residences	75.0%
General Hospitals	5.1
Nursing Homes	4.0
Deaths	2.6
Other	13.2

**STAFFING****FTES**

Administrators	6.0
Reg. Nurse Supervisors	7.0
Registered Nurses	67.8
Licensed Practical Nurses	2.7
Home Health Aides	26.1
Physical Therapists	14.1
Occupational Therapists	6.6
Speech Pathologists	0.3
Respiratory Therapists	10.0
Medical Social Workers	7.2
Other Therapeutic Staff	1.4
Personal Care Workers	0.0
Homemakers	9.5
Other Staff	42.7
<b>TOTAL FTES</b>	<b>201.3</b>

**REVENUE**

Billings	\$ 11,660,906
Disallowances	857,524
Collections	10,803,382
Other	660,139
<b>Total</b>	<b>11,463,521</b>

**EXPENSES**

<b>Total</b>	<b>\$ 10,862,265</b>
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**Independent Health Care, Inc.**

815 Forward Drive

Madison WI 53711

Dane County

**COUNTIES SERVED**

Dane

(608) 274-2097

License Number: 294

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 99

**TOTAL NUMBER OF ADMISSIONS** 96**PERCENT ADMISSIONS FROM:**

Private Residences	30.2%
General Hospitals	29.2
Nursing Homes	34.4
Other	6.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 105

**PERCENT DISCHARGES TO:**

Private Residences	72.4%
General Hospitals	1.0
Nursing Homes	6.7
Deaths	0.0
Other	20.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	70	576	8.2
Home Health Aide	33	376	11.4
Physical Therapy	81	604	7.5
Spch/Occ/Resp Therapy	29	119	4.1
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,675	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 98.0%
4 to 34 0.0	Medicaid 0.0
35 to 54 1.0	Other Federal 0.0
55 to 64 2.0	State Funds 0.0
65 to 74 11.1	Private Insurance 2.0
75 to 84 41.4	Self Pay 0.0
85 & over 44.4	Other 0.0
	TOTAL PATIENTS 100

Males 32.3% Females 67.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 2.0%
Cancer 2.0	Genitourinary Sys. 1.0
Diabetes 2.0	Preg. & Childbirth 0.0
Diseases of Blood 3.0	Arthropathies 16.2
Dementia/Alzheimers 0.0	Osteopathies 2.0
Psychoses/Neuroses 1.0	Perinatal Period 0.0
Central Nervous Sys. 5.1	Ill-Defined Cond. 19.2
Paralysis/CP 0.0	Fractures 7.1
Cardiovascular 8.1	Wounds, Burns 1.0
Stroke 5.1	Compl. of Surgery 0.0
Respiratory 9.1	Other Conditions 16.2

**REVENUE**

Billings \$	262,900
Disallowances	0
Collections	262,900
Other	46
Total	262,946

**EXPENSES**

Total \$	351,494
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**STAFFING****FTES**

Administrators	1.4
Reg. Nurse Supervisors	0.0
Registered Nurses	1.0
Licensed Practical Nurses	0.3
Home Health Aides	0.8
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.6
TOTAL FTES	6.2

**Interim Healthcare of Madison**

702 North Blackhawk Avenue, Suite 215  
 Madison WI 53705                      Dane County

**COUNTIES SERVED**

Dane  
 Rock

(608) 238-0268

License Number: 206  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? No  
 Title 19 (Medicaid) certified? No  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 204

**TOTAL NUMBER OF ADMISSIONS** 174

**PERCENT ADMISSIONS FROM:**

Private Residences	53.4%
General Hospitals	31.0
Nursing Homes	11.5
Other	4.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 135

**PERCENT DISCHARGES TO:**

Private Residences	44.4%
General Hospitals	23.0
Nursing Homes	16.3
Deaths	7.4
Other	8.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	16	493	30.8
Home Health Aide	15	438	29.2
Physical Therapy	3	51	17.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	1	30	30.0
Personal Care/PC RN Supv.	142	11,859	83.5
Other Home Health Care	25	2,887	115.5
Homemkr & Other Non HH	97	4,834	49.8
TOTAL	XXXXXXX	20,592	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4      0.0%	Medicare      0.0%
4 to 34      8.3	Medicaid      46.1
35 to 54      13.2	Other Federal      0.0
55 to 64      7.8	State Funds      0.0
65 to 74      9.8	Private Insurance      7.8
75 to 84      27.9	Self Pay      42.5
85 & over      32.8	Other      3.7
	TOTAL PATIENTS      219

Males 36.8%      Females 63.2 %

**PRIMARY DIAGNOSIS**

Infectious Disorders	2.9%	Digestive Disorders	0.5%
Cancer	2.9	Genitourinary Sys.	0.0
Diabetes	3.4	Preg. & Childbirth	0.0
Diseases of Blood	0.5	Arthropathies	3.4
Dementia/Alzheimers	7.8	Osteopathies	2.0
Psychoses/Neuroses	0.5	Perinatal Period	0.0
Central Nervous Sys.	3.9	Ill-Defined Cond.	20.1
Paralysis/CP	6.9	Fractures	3.9
Cardiovascular	5.9	Wounds, Burns	1.0
Stroke	7.4	Compl. of Surgery	1.0
Respiratory	2.0	Other Conditions	24.0

**REVENUE**

Billings	\$ 1,623,967
Disallowances	79,349
Collections	1,544,618
Other	0
Total	1,544,618

**EXPENSES**

Total	\$ 1,529,346
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.7
Licensed Practical Nurses	0.5
Home Health Aides	18.6
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	19.4
Homemakers	12.0
Other Staff	6.0
TOTAL FTES	59.1



**Meriter Home Care Agency**

2180 West Beltline Highway

Madison WI 53713

Dane County

(608) 327-3700

License Number: 222

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 1,676

**COUNTIES SERVED**

Columbia

Dane

Green

Iowa

Jefferson

LaFayette

Rock

Sauk

Walworth

**TOTAL NUMBER OF ADMISSIONS** 1,677**PERCENT ADMISSIONS FROM:**

Private Residences 18.6%

General Hospitals 68.6

Nursing Homes 9.1

Other 3.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,644

**PERCENT DISCHARGES TO:**

Private Residences 79.3%

General Hospitals 2.1

Nursing Homes 3.8

Deaths 1.5

Other 13.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,283	12,176	9.5
Home Health Aide	269	4,018	14.9
Physical Therapy	1,144	8,284	7.2
Spch/Occ/Resp Therapy	433	1,928	4.5
Medical Social Service	198	217	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	26,623	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 47.3%
4 to 34 4.6	Medicaid 6.0
35 to 54 15.1	Other Federal 0.0
55 to 64 15.2	State Funds 0.0
65 to 74 18.6	Private Insurance 38.7
75 to 84 27.4	Self Pay 7.0
85 & over 18.6	Other 1.0
	TOTAL PATIENTS 2,529

Males 38.2% Females 61.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.4%	Digestive Disorders 5.1%
Cancer 5.7	Genitourinary Sys. 2.4
Diabetes 2.4	Preg. & Childbirth 0.5
Diseases of Blood 0.8	Arthropathies 21.6
Dementia/Alzheimers 0.4	Osteopathies 2.4
Psychoses/Neuroses 0.4	Perinatal Period 0.2
Central Nervous Sys. 2.5	Ill-Defined Cond. 4.8
Paralysis/CP 0.7	Fractures 7.5
Cardiovascular 9.8	Wounds, Burns 1.8
Stroke 2.8	Compl. of Surgery 2.6
Respiratory 7.4	Other Conditions 16.8

**REVENUE**

Billings \$	3,804,983
Disallowances	678,630
Collections	3,126,353
Other	384
Total	3,126,737

**EXPENSES**

Total \$	2,917,404
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**STAFFING****FTES**

Administrators	0.4
Reg. Nurse Supervisors	2.0
Registered Nurses	18.8
Licensed Practical Nurses	0.9
Home Health Aides	4.8
Physical Therapists	8.9
Occupational Therapists	1.6
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.7
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	6.0
TOTAL FTES	44.1

**University Hospital Home Health Agency**

2030 Pinehurst Drive

Middleton WI 53562

Dane County

(608) 203-2273

License Number: 252

Ownership of Agency: State

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 1,034

**COUNTIES SERVED**

Columbia

Dane

Grant

Green

Jefferson

Richland

**TOTAL NUMBER OF ADMISSIONS** 1,064**PERCENT ADMISSIONS FROM:**

Private Residences 24.2%

General Hospitals 64.1

Nursing Homes 8.7

Other 2.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,077

**PERCENT DISCHARGES TO:**

Private Residences 84.5%

General Hospitals 3.2

Nursing Homes 2.4

Deaths 1.7

Other 8.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	827	9,764	11.8
Home Health Aide	99	1,088	11.0
Physical Therapy	587	3,264	5.6
Spch/Occ/Resp Therapy	169	584	3.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,700	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.9%	Medicare 52.3%
4 to 34 9.4	Medicaid 6.1
35 to 54 22.7	Other Federal 0.0
55 to 64 19.3	State Funds 0.0
65 to 74 14.0	Private Insurance 37.0
75 to 84 20.7	Self Pay 1.6
85 & over 11.9	Other 3.0
	TOTAL PATIENTS 1,064

Males 39.4% Females 60.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.1%	Digestive Disorders 1.7%
Cancer 9.0	Genitourinary Sys. 3.2
Diabetes 2.3	Preg. & Childbirth 0.5
Diseases of Blood 0.6	Arthropathies 14.1
Dementia/Alzheimers 0.2	Osteopathies 2.0
Psychoses/Neuroses 0.8	Perinatal Period 0.4
Central Nervous Sys. 1.8	Ill-Defined Cond. 9.7
Paralysis/CP 0.7	Fractures 5.6
Cardiovascular 7.9	Wounds, Burns 1.4
Stroke 1.8	Compl. of Surgery 4.2
Respiratory 4.7	Other Conditions 26.3

REVENUE	
Billings \$	1,962,423
Disallowances	387,314
Collections	1,575,109
Other	0
Total	1,575,109

EXPENSES	
Total \$	1,871,218

**STAFFING****FTES**

Administrators	0.3
Reg. Nurse Supervisors	1.0
Registered Nurses	11.5
Licensed Practical Nurses	2.5
Home Health Aides	1.3
Physical Therapists	4.0
Occupational Therapists	0.8
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.8
TOTAL FTES	25.1

**Stoughton Hospital Home Health United**

900 Ridge Street  
Stoughton WI 53589

Dane County

(608) 837-2366

**COUNTIES SERVED**

Dane  
Green  
Jefferson  
Rock

License Number: 341

Ownership of Agency: Nonprofit Association

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 465

**TOTAL NUMBER OF ADMISSIONS** 481

**PERCENT ADMISSIONS FROM:**

Private Residences	3.1%
General Hospitals	70.1
Nursing Homes	21.4
Other	5.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 450

**PERCENT DISCHARGES TO:**

Private Residences	74.4%
General Hospitals	1.8
Nursing Homes	5.6
Deaths	1.1
Other	17.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	465	5,513	11.9
Home Health Aide	141	2,201	15.6
Physical Therapy	337	2,543	7.5
Spch/Occ/Resp Therapy	119	558	4.7
Medical Social Service	97	156	1.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,971	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 80.9%
4 to 34 3.2	Medicaid 1.7
35 to 54 8.2	Other Federal 0.0
55 to 64 7.3	State Funds 0.0
65 to 74 21.7	Private Insurance 16.6
75 to 84 34.6	Self Pay 0.8
85 & over 24.9	Other 0.0
	TOTAL PATIENTS 481

Males 39.1% Females 60.9 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.6%	Digestive Disorders 4.7%
Cancer 4.1	Genitourinary Sys. 3.4
Diabetes 4.1	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 23.7
Dementia/Alzheimers 0.2	Osteopathies 1.3
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 1.5	Ill-Defined Cond. 11.2
Paralysis/CP 0.0	Fractures 5.8
Cardiovascular 11.2	Wounds, Burns 1.9
Stroke 2.6	Compl. of Surgery 1.5
Respiratory 4.7	Other Conditions 14.8

**REVENUE**

Billings \$	1,381,748
Disallowances	150,346
Collections	1,231,402
Other	0
Total	1,231,402

**EXPENSES**

Total \$	1,105,264
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.6
Licensed Practical Nurses	0.0
Home Health Aides	2.2
Physical Therapists	2.3
Occupational Therapists	0.8
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	15.4

**Hillside Home Health**

709 South University Avenue  
Beaver Dam WI 53916

Dodge County

(920) 887-4050

License Number: 188

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 518

**COUNTIES SERVED**

Columbia  
Dane  
Dodge  
Fond du Lac  
Green Lake  
Jefferson

**TOTAL NUMBER OF ADMISSIONS** 521

**PERCENT ADMISSIONS FROM:**

Private Residences	27.6%
General Hospitals	61.6
Nursing Homes	8.3
Other	2.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 527

**PERCENT DISCHARGES TO:**

Private Residences	78.6%
General Hospitals	5.9
Nursing Homes	5.1
Deaths	4.6
Other	5.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	486	5,822	12.0
Home Health Aide	163	2,624	16.1
Physical Therapy	175	934	5.3
Spch/Occ/Resp Therapy	47	197	4.2
Medical Social Service	14	18	1.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,595	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.6%	Medicare 76.8%
4 to 34 1.5	Medicaid 4.6
35 to 54 8.1	Other Federal 0.0
55 to 64 9.3	State Funds 0.0
65 to 74 16.8	Private Insurance 17.5
75 to 84 35.1	Self Pay 0.2
85 & over 24.5	Other 1.0
	TOTAL PATIENTS 521

Males 46.9% Females 53.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.4%	Digestive Disorders 5.0%
Cancer 10.6	Genitourinary Sys. 4.1
Diabetes 4.2	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 10.4
Dementia/Alzheimers 0.8	Osteopathies 3.1
Psychoses/Neuroses 0.2	Perinatal Period 4.2
Central Nervous Sys. 2.3	Ill-Defined Cond. 4.1
Paralysis/CP 0.8	Fractures 6.8
Cardiovascular 18.9	Wounds, Burns 1.9
Stroke 2.9	Compl. of Surgery 2.9
Respiratory 10.4	Other Conditions 5.0

**REVENUE**

Billings \$	1,103,943
Disallowances	121,784
Collections	982,159
Other	3,778
Total	985,937

**EXPENSES**

Total \$	1,267,666
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.1
Registered Nurses	6.4
Licensed Practical Nurses	0.0
Home Health Aides	2.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.4
TOTAL FTES	14.2

**Marquardt Memorial Manor, Inc.**

1020 Hill Street  
Watertown WI 53098

Dodge County

**COUNTIES SERVED**

Dodge  
Jefferson

(920) 261-7108

License Number: 134

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 179

**TOTAL NUMBER OF ADMISSIONS** 179

**PERCENT ADMISSIONS FROM:**

Private Residences	69.8%
General Hospitals	8.9
Nursing Homes	4.5
Other	16.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 181

**PERCENT DISCHARGES TO:**

Private Residences	63.0%
General Hospitals	14.9
Nursing Homes	17.1
Deaths	0.6
Other	4.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	132	1,707	12.9
Home Health Aide	81	1,456	18.0
Physical Therapy	51	1,456	28.5
Spch/Occ/Resp Therapy	20	112	5.6
Medical Social Service	15	150	10.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	92	1,612	17.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,493	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 62.0%
4 to 34 0.0	Medicaid 6.7
35 to 54 1.7	Other Federal 0.0
55 to 64 4.5	State Funds 0.0
65 to 74 7.8	Private Insurance 0.0
75 to 84 26.8	Self Pay 29.1
85 & over 59.2	Other 2.2
	TOTAL PATIENTS 179

Males 27.9% Females 72.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 1.1%
Cancer 2.8	Genitourinary Sys. 4.5
Diabetes 2.8	Preg. & Childbirth 0.0
Diseases of Blood 3.4	Arthropathies 15.6
Dementia/Alzheimers 1.1	Osteopathies 1.1
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 0.6	Ill-Defined Cond. 10.1
Paralysis/CP 0.6	Fractures 7.8
Cardiovascular 24.6	Wounds, Burns 3.9
Stroke 1.7	Compl. of Surgery 0.0
Respiratory 6.1	Other Conditions 11.2

**REVENUE**

Billings \$	420,014
Disallowances	73,760
Collections	346,254
Other	36,996
Total	383,250

**EXPENSES**

Total \$	371,996
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	2.6
Licensed Practical Nurses	0.0
Home Health Aides	2.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	7.5

**Watertown Memorial Hospital - Home Health Program**

125 Hospital Drive  
Watertown WI 53098

Dodge County

**COUNTIES SERVED**

Dodge  
Jefferson  
Waukesha

(920) 262-4262

License Number: 165

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 403

**TOTAL NUMBER OF ADMISSIONS** 388

**PERCENT ADMISSIONS FROM:**

Private Residences	4.4%
General Hospitals	60.3
Nursing Homes	7.5
Other	27.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 395

**PERCENT DISCHARGES TO:**

Private Residences	87.8%
General Hospitals	1.8
Nursing Homes	5.3
Deaths	3.3
Other	1.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	280	1,980	7.1
Home Health Aide	29	648	22.3
Physical Therapy	98	1,166	11.9
Spch/Occ/Resp Therapy	28	142	5.1
Medical Social Service	4	5	1.3
Private Duty Nursing	1	12	12.0
Personal Care/PC RN Supv.	86	3,325	38.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	22	688	31.3
TOTAL	XXXXXXX	7,966	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 7.2%	Medicare 52.1%
4 to 34 23.1	Medicaid 9.0
35 to 54 9.4	Other Federal 0.0
55 to 64 7.4	State Funds 0.0
65 to 74 11.7	Private Insurance 32.5
75 to 84 25.8	Self Pay 5.7
85 & over 15.4	Other 0.7
	TOTAL PATIENTS 422

Males 29.5% Females 70.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.2%	Digestive Disorders 2.5%
Cancer 2.5	Genitourinary Sys. 1.0
Diabetes 2.5	Preg. & Childbirth 0.0
Diseases of Blood 0.5	Arthropathies 8.7
Dementia/Alzheimers 0.0	Osteopathies 0.5
Psychoses/Neuroses 0.0	Perinatal Period 6.5
Central Nervous Sys. 2.7	Ill-Defined Cond. 10.4
Paralysis/CP 0.2	Fractures 4.5
Cardiovascular 12.4	Wounds, Burns 1.0
Stroke 1.0	Compl. of Surgery 4.0
Respiratory 3.2	Other Conditions 35.7

**REVENUE**

Billings \$	707,490
Disallowances	50,907
Collections	656,583
Other	361
Total	656,944

**EXPENSES**

Total \$	891,999
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.4
Licensed Practical Nurses	0.0
Home Health Aides	1.2
Physical Therapists	1.0
Occupational Therapists	0.0
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.0
Homemakers	1.6
Other Staff	1.0
TOTAL FTES	11.3

**Door County Memorial Home Health**

1300 Egg Harbor Road, #110

Sturgeon Bay WI 54235

Door County

**COUNTIES SERVED**

Door

Kewaunee

(920) 743-7983

License Number: 187

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 258

**TOTAL NUMBER OF ADMISSIONS** 262**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	48.1
Nursing Homes	4.6
Other	47.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 262

**PERCENT DISCHARGES TO:**

Private Residences	16.8%
General Hospitals	2.3
Nursing Homes	7.3
Deaths	3.8
Other	69.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	258	3,309	12.8
Home Health Aide	92	1,986	21.6
Physical Therapy	118	855	7.2
Spch/Occ/Resp Therapy	62	350	5.6
Medical Social Service	0	0	0.0
Private Duty Nursing	5	22	4.4
Personal Care/PC RN Supv.	39	2,484	63.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,006	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 77.7%
4 to 34 3.5	Medicaid 9.2
35 to 54 7.0	Other Federal 0.0
55 to 64 9.3	State Funds 0.0
65 to 74 19.8	Private Insurance 10.3
75 to 84 33.7	Self Pay 2.6
85 & over 26.7	Other 0.4
	TOTAL PATIENTS 273

Males 37.2% Females 62.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders	0.4%	Digestive Disorders	3.5%
Cancer	6.2	Genitourinary Sys.	2.3
Diabetes	1.6	Preg. & Childbirth	0.0
Diseases of Blood	0.4	Arthropathies	18.6
Dementia/Alzheimers	0.4	Osteopathies	1.6
Psychoses/Neuroses	1.2	Perinatal Period	0.0
Central Nervous Sys.	1.9	Ill-Defined Cond.	4.3
Paralysis/CP	0.8	Fractures	6.2
Cardiovascular	16.7	Wounds, Burns	0.8
Stroke	1.2	Compl. of Surgery	3.9
Respiratory	7.0	Other Conditions	21.3

REVENUE	
Billings	\$ 1,064,710
Disallowances	356,390
Collections	708,320
Other	449
Total	708,769

EXPENSES	
Total	\$ 922,325

STAFFING	FTEs
Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	3.6
Licensed Practical Nurses	0.0
Home Health Aides	1.8
Physical Therapists	0.6
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.1
Homemakers	0.0
Other Staff	2.6
TOTAL FTEs	12.5

**Douglas County Health Department - Home Health Care**  
 1316 North 14th Street, Suite 324  
 Superior WI 54880 Douglas County

**COUNTIES SERVED**  
 Douglas

(715) 395-1601

License Number: 50  
 Ownership of Agency: County  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 242

**TOTAL NUMBER OF ADMISSIONS** 239

**PERCENT ADMISSIONS FROM:**

Private Residences	0.4%
General Hospitals	72.4
Nursing Homes	0.0
Other	27.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 242

**PERCENT DISCHARGES TO:**

Private Residences	81.8%
General Hospitals	11.6
Nursing Homes	0.0
Deaths	2.1
Other	4.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	203	2,488	12.3
Home Health Aide	122	899	7.4
Physical Therapy	150	1,084	7.2
Spch/Occ/Resp Therapy	86	357	4.2
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,828	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 78.5%
4 to 34 2.1	Medicaid 13.7
35 to 54 4.5	Other Federal 0.0
55 to 64 6.6	State Funds 0.0
65 to 74 13.6	Private Insurance 7.2
75 to 84 21.9	Self Pay 0.7
85 & over 51.2	Other 0.0
	TOTAL PATIENTS 293

Males 42.1% Females 57.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 6.6%	Digestive Disorders 5.8%		
Cancer 4.5	Genitourinary Sys. 5.0		
Diabetes 4.5	Preg. & Childbirth 0.0		
Diseases of Blood 7.4	Arthropathies 5.0		
Dementia/Alzheimers 1.7	Osteopathies 11.2		
Psychoses/Neuroses 2.5	Perinatal Period 0.0		
Central Nervous Sys. 2.5	Ill-Defined Cond. 4.5		
Paralysis/CP 0.0	Fractures 8.7		
Cardiovascular 6.6	Wounds, Burns 3.7		
Stroke 2.5	Compl. of Surgery 1.7		
Respiratory 6.6	Other Conditions 9.1		

REVENUE	
Billings \$	1,299,486
Disallowances	353,725
Collections	945,761
Other	135
Total	945,896

EXPENSES	
Total \$	807,451

**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.1
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTES	13.1



**The Dove, Inc.**

1416 Cumming Avenue, Suite 2B  
Superior WI 54880

Douglas County

**COUNTIES SERVED**

Douglas

(715) 392-3133

License Number: 172

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 107

**TOTAL NUMBER OF ADMISSIONS** 56

**PERCENT ADMISSIONS FROM:**

Private Residences	5.4%
General Hospitals	78.6
Nursing Homes	10.7
Other	5.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 73

**PERCENT DISCHARGES TO:**

Private Residences	57.5%
General Hospitals	20.5
Nursing Homes	2.7
Deaths	0.0
Other	19.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	79	1,150	14.6
Home Health Aide	22	244	11.1
Physical Therapy	29	236	8.1
Spch/Occ/Resp Therapy	17	76	4.5
Medical Social Service	0	0	0.0
Private Duty Nursing	2	1,159	579.5
Personal Care/PC RN Supv.	80	11,879	148.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,744	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 35.2%
4 to 34 10.3	Medicaid 47.7
35 to 54 15.0	Other Federal 0.0
55 to 64 14.0	State Funds 0.0
65 to 74 13.1	Private Insurance 6.3
75 to 84 34.6	Self Pay 3.9
85 & over 12.1	Other 7.0
	TOTAL PATIENTS 128

Males 61.7% Females 38.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.9%	Digestive Disorders 0.0%
Cancer 1.9	Genitourinary Sys. 0.0
Diabetes 6.5	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 12.1
Dementia/Alzheimers 0.9	Osteopathies 0.9
Psychoses/Neuroses 12.1	Perinatal Period 0.0
Central Nervous Sys. 7.5	Ill-Defined Cond. 7.5
Paralysis/CP 2.8	Fractures 1.9
Cardiovascular 12.1	Wounds, Burns 0.0
Stroke 9.3	Compl. of Surgery 2.8
Respiratory 2.8	Other Conditions 16.8

**REVENUE**

Billings \$	963,392
Disallowances	93,468
Collections	869,924
Other	0
Total	869,924

**EXPENSES**

Total \$	788,033
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**STAFFING****FTES**

Administrators	0.4
Reg. Nurse Supervisors	1.0
Registered Nurses	3.3
Licensed Practical Nurses	1.8
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	11.0
Homemakers	0.0
Other Staff	2.8
TOTAL FTES	20.4

**Aurora Community Health, Inc.**

406 Technology Drive East, #B  
Menomonie WI 54751

Dunn County

(715) 235-4667

License Number: 310

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 114

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	10	240	24.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	222	80,885	364.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	81,125	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 27.2	Medicaid 100.0
35 to 54 52.6	Other Federal 0.0
55 to 64 10.5	State Funds 0.0
65 to 74 7.0	Private Insurance 0.0
75 to 84 2.6	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 114

Males 57.0% Females 43.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.9	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.9	Osteopathies 0.0
Psychoses/Neuroses 1.8	Perinatal Period 0.0
Central Nervous Sys. 1.8	Ill-Defined Cond. 0.0
Paralysis/CP 17.5	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 1.8	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 75.4

**COUNTIES SERVED**

Barron  
Burnett  
Clark  
Dunn  
Eau Claire  
Jackson  
Marathon  
Pierce  
Polk  
Rusk  
St. Croix  
Taylor  
Trempealeau  
Washburn

**TOTAL NUMBER OF ADMISSIONS** 17

**PERCENT ADMISSIONS FROM:**

Private Residences	35.3%
General Hospitals	0.0
Nursing Homes	29.4
Other	35.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	25.0%
General Hospitals	0.0
Nursing Homes	12.5
Deaths	12.5
Other	50.0

**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	3.0
Registered Nurses	0.6
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.8
<b>TOTAL FTES</b>	<b>6.4</b>

**REVENUE**

Billings \$	2,734,850
Disallowances	0
Collections	2,734,850
Other	1,451
<b>Total</b>	<b>2,736,301</b>

**EXPENSES**

<b>Total</b>	<b>\$ 2,733,168</b>
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**Dunn County Home Health Care**

800 Wilson Avenue  
Menomonie WI 54751

Dunn County

**COUNTIES SERVED**

Dunn

(715) 232-1518

License Number: 51

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 202

**TOTAL NUMBER OF ADMISSIONS** 172

**PERCENT ADMISSIONS FROM:**

Private Residences	33.7%
General Hospitals	30.2
Nursing Homes	33.7
Other	2.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 182

**PERCENT DISCHARGES TO:**

Private Residences	64.8%
General Hospitals	1.6
Nursing Homes	18.1
Deaths	6.0
Other	9.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	201	2,900	14.4
Home Health Aide	76	1,573	20.7
Physical Therapy	9	42	4.7
Spch/Occ/Resp Therapy	14	98	7.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,613	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 56.8%
4 to 34 3.0	Medicaid 19.5
35 to 54 12.4	Other Federal 0.0
55 to 64 8.4	State Funds 0.0
65 to 74 19.8	Private Insurance 17.7
75 to 84 30.2	Self Pay 1.8
85 & over 25.7	Other 4.1
	TOTAL PATIENTS 220

Males 40.6% Females 59.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 2.0%	Digestive Disorders 1.5%
Cancer 4.5	Genitourinary Sys. 5.4
Diabetes 8.9	Preg. & Childbirth 0.0
Diseases of Blood 0.5	Arthropathies 9.9
Dementia/Alzheimers 0.0	Osteopathies 1.5
Psychoses/Neuroses 1.0	Perinatal Period 0.5
Central Nervous Sys. 2.0	Ill-Defined Cond. 3.0
Paralysis/CP 1.0	Fractures 10.4
Cardiovascular 16.8	Wounds, Burns 1.5
Stroke 4.0	Compl. of Surgery 5.0
Respiratory 8.4	Other Conditions 12.4

**REVENUE**

Billings \$	487,972
Disallowances	25,883
Collections	462,089
Other	16,648
Total	478,737

**EXPENSES**

Total \$	481,337
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	4.3
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	10.5

**Lifenet, LLC**

800 Wisconsin Street, Suite 305

Eau Claire WI 54703

Eau Claire County

(715) 835-4111

License Number: 335

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 165

**COUNTIES SERVED**

Chippewa

Clark

Eau Claire

Marathon

Monroe

Taylor

Trempealeau

**TOTAL NUMBER OF ADMISSIONS** 58**PERCENT ADMISSIONS FROM:**

Private Residences	96.6%
General Hospitals	0.0
Nursing Homes	0.0
Other	3.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 56

**PERCENT DISCHARGES TO:**

Private Residences	37.5%
General Hospitals	0.0
Nursing Homes	32.1
Deaths	7.1
Other	23.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2	78	39.0
Home Health Aide	1	66	66.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	330	34,789	105.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	34,933	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 22.4	Medicaid 94.2
35 to 54 15.2	Other Federal 0.0
55 to 64 14.5	State Funds 0.0
65 to 74 13.9	Private Insurance 5.8
75 to 84 15.2	Self Pay 0.0
85 & over 18.8	Other 0.0
	TOTAL PATIENTS 171

Males 27.9% Females 72.1 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.6%	Digestive Disorders 0.0%		
Cancer 1.2	Genitourinary Sys. 0.0		
Diabetes 14.5	Preg. & Childbirth 0.0		
Diseases of Blood 1.2	Arthropathies 8.5		
Dementia/Alzheimers 0.6	Osteopathies 4.2		
Psychoses/Neuroses 2.4	Perinatal Period 0.0		
Central Nervous Sys. 6.7	Ill-Defined Cond. 2.4		
Paralysis/CP 12.1	Fractures 1.2		
Cardiovascular 7.9	Wounds, Burns 3.0		
Stroke 6.7	Compl. of Surgery 0.0		
Respiratory 3.6	Other Conditions 23.0		

**REVENUE**

Billings \$	1,121,788
Disallowances	0
Collections	1,121,788
Other	37,149
Total	1,158,937

**EXPENSES**

Total \$	1,039,701
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.5
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	47.1
Homemakers	0.0
Other Staff	10.4
TOTAL FTES	62.0

**Mission Home Health - Lutheran Social Services**  
 1101 West Clairemont Avenue, Suite 2G  
 Eau Claire WI 54701 Eau Claire County

**COUNTIES SERVED**  
 Chippewa  
 Clark  
 Eau Claire  
 Jackson  
 Monroe

(715) 855-5043

License Number: 1010  
 Ownership of Agency: Nonprofit Church/Corporation  
 Title 18 (Medicare) certified? No  
 Title 19 (Medicaid) certified? No  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 92

**TOTAL NUMBER OF ADMISSIONS** 7

**PERCENT ADMISSIONS FROM:**

Private Residences	14.3%
General Hospitals	0.0
Nursing Homes	42.9
Other	42.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	62.5%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	37.5
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	3	312	104.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	184	87,779	477.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	88,091	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 29.3	Medicaid 98.9
35 to 54 39.1	Other Federal 0.0
55 to 64 19.6	State Funds 0.0
65 to 74 7.6	Private Insurance 0.0
75 to 84 4.3	Self Pay 1.1
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 92

Males 45.7% Females 54.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 1.1%
Cancer 1.1	Genitourinary Sys. 2.2
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 2.2
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 13.0	Perinatal Period 1.1
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 7.6	Fractures 0.0
Cardiovascular 3.3	Wounds, Burns 0.0
Stroke 1.1	Compl. of Surgery 0.0
Respiratory 1.1	Other Conditions 66.3

**REVENUE**

Billings \$	2,795,517
Disallowances	343,696
Collections	2,451,821
Other	0
Total	2,451,821

**EXPENSES**

Total \$	3,160,016
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.0
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	71.3
Homemakers	0.0
Other Staff	1.4
TOTAL FTES	76.6

**Northwest Wisconsin Homecare, Inc.**

2620 Stein Boulevard, Box 2060

Eau Claire WI 54702

Eau Claire County

(715) 831-0100

License Number: 127

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 756

**COUNTIES SERVED**

Barron

Buffalo

Chippewa

Dunn

Eau Claire

Pepin

Pierce

Rusk

St. Croix

Trempealeau

**TOTAL NUMBER OF ADMISSIONS** 672**PERCENT ADMISSIONS FROM:**

Private Residences 39.4%

General Hospitals 48.5

Nursing Homes 9.8

Other 2.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 661

**PERCENT DISCHARGES TO:**

Private Residences 70.8%

General Hospitals 4.4

Nursing Homes 5.0

Deaths 3.5

Other 16.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	636	8,139	12.8
Home Health Aide	230	10,014	43.5
Physical Therapy	246	861	3.5
Spch/Occ/Resp Therapy	111	300	2.7
Medical Social Service	68	89	1.3
Private Duty Nursing	11	3,779	343.5
Personal Care/PC RN Supv.	70	4,179	59.7
Other Home Health Care	6	18	3.0
Homemkr & Other Non HH	128	5,435	42.5
TOTAL	XXXXXXX	32,814	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.7%	Medicare 61.4%
4 to 34 7.7	Medicaid 18.6
35 to 54 9.0	Other Federal 0.4
55 to 64 8.6	State Funds 0.0
65 to 74 16.8	Private Insurance 8.5
75 to 84 29.9	Self Pay 8.0
85 & over 26.3	Other 3.1
	TOTAL PATIENTS 826

Males 41.3% Females 58.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.7%	Digestive Disorders 0.9%
Cancer 5.7	Genitourinary Sys. 1.7
Diabetes 5.6	Preg. & Childbirth 0.1
Diseases of Blood 2.1	Arthropathies 6.9
Dementia/Alzheimers 2.0	Osteopathies 1.7
Psychoses/Neuroses 0.4	Perinatal Period 0.5
Central Nervous Sys. 1.3	Ill-Defined Cond. 5.6
Paralysis/CP 2.8	Fractures 5.4
Cardiovascular 15.5	Wounds, Burns 3.2
Stroke 0.8	Compl. of Surgery 2.8
Respiratory 7.3	Other Conditions 27.1

**REVENUE**

Billings \$	3,231,832
Disallowances	626,400
Collections	2,605,432
Other	12,617
Total	2,618,049

**EXPENSES**

Total \$	3,173,882
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	14.2
Registered Nurses	20.7
Licensed Practical Nurses	6.2
Home Health Aides	12.6
Physical Therapists	1.0
Occupational Therapists	0.4
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	2.3
Other Therapeutic Staff	0.0
Personal Care Workers	5.4
Homemakers	15.3
Other Staff	29.0
TOTAL FTES	107.2

**Fond du Lac Co Home Health Service**

160 South Macy Street

Fond du Lac WI 54935

Fond du Lac County

**COUNTIES SERVED**

Fond du Lac

(920) 929-3085

License Number: 54

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 223

**TOTAL NUMBER OF ADMISSIONS** 160**PERCENT ADMISSIONS FROM:**

Private Residences	42.5%
General Hospitals	31.9
Nursing Homes	8.1
Other	17.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 169

**PERCENT DISCHARGES TO:**

Private Residences	60.4%
General Hospitals	10.7
Nursing Homes	7.1
Deaths	12.4
Other	9.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	108	2,230	20.6
Home Health Aide	54	2,862	53.0
Physical Therapy	23	183	8.0
Spch/Occ/Resp Therapy	12	105	8.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	198	5,649	28.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,029	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 30.7%
4 to 34 2.2	Medicaid 8.3
35 to 54 9.4	Other Federal 0.0
55 to 64 13.9	State Funds 29.0
65 to 74 18.8	Private Insurance 3.7
75 to 84 26.5	Self Pay 3.7
85 & over 28.3	Other 24.5
	TOTAL PATIENTS 241

Males 30.0% Females 70.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.9%	Digestive Disorders 2.7%		
Cancer 3.1	Genitourinary Sys. 1.3		
Diabetes 7.6	Preg. & Childbirth 0.0		
Diseases of Blood 1.3	Arthropathies 14.8		
Dementia/Alzheimers 1.3	Osteopathies 0.9		
Psychoses/Neuroses 3.1	Perinatal Period 1.3		
Central Nervous Sys. 4.9	Ill-Defined Cond. 7.6		
Paralysis/CP 0.9	Fractures 4.0		
Cardiovascular 16.6	Wounds, Burns 4.9		
Stroke 7.6	Compl. of Surgery 0.4		
Respiratory 4.9	Other Conditions 9.4		

**REVENUE**

Billings \$	784,573
Disallowances	190,322
Collections	594,251
Other	12,246
Total	606,497

**EXPENSES**

Total \$	861,244
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	19.8
Licensed Practical Nurses	0.0
Home Health Aides	4.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.1
Homemakers	0.0
Other Staff	10.3
TOTAL FTES	40.1

**St. Agnes Hospital - Home Care Services**

239 Trowbridge Drive

Fond du Lac WI 54936

Fond du Lac County

(920) 923-7950

License Number: 55

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 800

**COUNTIES SERVED**

Calumet

Dodge

Fond du Lac

Green Lake

Marquette

Sheboygan

Washington

Winnebago

**TOTAL NUMBER OF ADMISSIONS** 788**PERCENT ADMISSIONS FROM:**

Private Residences 14.3%

General Hospitals 78.7

Nursing Homes 6.1

Other 0.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 788

**PERCENT DISCHARGES TO:**

Private Residences 85.8%

General Hospitals 1.4

Nursing Homes 3.2

Deaths 1.3

Other 8.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	620	5,449	8.8
Home Health Aide	126	1,395	11.1
Physical Therapy	230	2,016	8.8
Spch/Occ/Resp Therapy	116	1,008	8.7
Medical Social Service	120	131	1.1
Private Duty Nursing	6	1,059	176.5
Personal Care/PC RN Supv.	73	5,480	75.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	26	797	30.7
TOTAL	XXXXXXX	17,335	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.6%	Medicare 55.3%
4 to 34 5.4	Medicaid 5.0
35 to 54 10.8	Other Federal 0.0
55 to 64 11.3	State Funds 6.5
65 to 74 16.4	Private Insurance 20.0
75 to 84 30.3	Self Pay 12.0
85 & over 21.4	Other 1.1
	TOTAL PATIENTS 855

Males 38.0% Females 62.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.9%	Digestive Disorders 6.9%
Cancer 8.9	Genitourinary Sys. 2.9
Diabetes 3.3	Preg. & Childbirth 0.5
Diseases of Blood 1.9	Arthropathies 6.4
Dementia/Alzheimers 0.4	Osteopathies 1.6
Psychoses/Neuroses 0.9	Perinatal Period 3.3
Central Nervous Sys. 2.4	Ill-Defined Cond. 10.6
Paralysis/CP 1.3	Fractures 6.8
Cardiovascular 14.1	Wounds, Burns 2.1
Stroke 2.4	Compl. of Surgery 4.3
Respiratory 7.0	Other Conditions 10.5

**REVENUE**

Billings \$	3,006,032
Disallowances	892,480
Collections	2,113,552
Other	3,582
Total	2,117,134

**EXPENSES**

Total \$	2,631,672
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.7
Registered Nurses	8.5
Licensed Practical Nurses	0.0
Home Health Aides	2.7
Physical Therapists	3.2
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.6
TOTAL FTES	19.4



**Grant County Home Nursing Service**

111 South Jefferson Street

Lancaster WI 53813

Grant County

**COUNTIES SERVED**

Grant

(608) 723-6416

License Number: 57

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 291

**TOTAL NUMBER OF ADMISSIONS** 278**PERCENT ADMISSIONS FROM:**

Private Residences	26.6%
General Hospitals	57.9
Nursing Homes	15.1
Other	0.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 285

**PERCENT DISCHARGES TO:**

Private Residences	74.0%
General Hospitals	13.0
Nursing Homes	8.1
Deaths	2.1
Other	2.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	264	2,395	9.1
Home Health Aide	48	154	3.2
Physical Therapy	95	792	8.3
Spch/Occ/Resp Therapy	30	190	6.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	104	2,114	20.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,645	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.3%	Medicare 45.6%
4 to 34 3.8	Medicaid 21.5
35 to 54 7.9	Other Federal 0.0
55 to 64 11.3	State Funds 0.0
65 to 74 24.7	Private Insurance 11.7
75 to 84 31.6	Self Pay 20.9
85 & over 20.3	Other 0.3
	TOTAL PATIENTS 316

Males 37.1% Females 62.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.7%	Digestive Disorders 3.4%		
Cancer 9.3	Genitourinary Sys. 1.0		
Diabetes 7.6	Preg. & Childbirth 0.0		
Diseases of Blood 0.7	Arthropathies 20.3		
Dementia/Alzheimers 3.4	Osteopathies 0.7		
Psychoses/Neuroses 2.1	Perinatal Period 0.0		
Central Nervous Sys. 3.4	Ill-Defined Cond. 3.4		
Paralysis/CP 1.0	Fractures 7.2		
Cardiovascular 16.2	Wounds, Burns 1.4		
Stroke 5.5	Compl. of Surgery 1.0		
Respiratory 4.8	Other Conditions 6.9		

REVENUE	
Billings \$	444,738
Disallowances	55,267
Collections	389,471
Other	0
Total	389,471

EXPENSES	
Total \$	558,647

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.4
Registered Nurses	4.3
Licensed Practical Nurses	0.0
Home Health Aides	1.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.5
Homemakers	0.0
Other Staff	1.6
TOTAL FTES	10.7

**Homeward Bound Home Health**

130 West Elm Street, PO Box 503

Lancaster WI 53813

Grant County

(608) 723-6601

License Number: 330

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 347

**COUNTIES SERVED**

Columbia

Crawford

Grant

Iowa

Juneau

LaFayette

Richland

Sauk

Vernon

**TOTAL NUMBER OF ADMISSIONS** 230**PERCENT ADMISSIONS FROM:**

Private Residences 10.4%

General Hospitals 40.9

Nursing Homes 13.9

Other 34.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 228

**PERCENT DISCHARGES TO:**

Private Residences 42.5%

General Hospitals 23.2

Nursing Homes 10.1

Deaths 2.6

Other 21.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	238	2,958	12.4
Home Health Aide	54	3,203	59.3
Physical Therapy	63	386	6.1
Spch/Occ/Resp Therapy	18	51	2.8
Medical Social Service	0	0	0.0
Private Duty Nursing	1	538	538.0
Personal Care/PC RN Supv.	346	25,766	74.5
Other Home Health Care	11	206	18.7
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	33,108	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE
Under 4 0.0%	Medicare	19.0%
4 to 34 6.3	Medicaid	55.2
35 to 54 11.0	Other Federal	0.0
55 to 64 14.4	State Funds	15.9
65 to 74 21.3	Private Insurance	8.8
75 to 84 30.5	Self Pay	0.5
85 & over 16.4	Other	0.5
	TOTAL PATIENTS	364

Males 36.6% Females 63.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.6%	Digestive Disorders 2.3%
Cancer 3.2	Genitourinary Sys. 0.6
Diabetes 6.6	Preg. & Childbirth 0.0
Diseases of Blood 0.3	Arthropathies 13.5
Dementia/Alzheimers 0.6	Osteopathies 0.6
Psychoses/Neuroses 6.1	Perinatal Period 0.0
Central Nervous Sys. 5.2	Ill-Defined Cond. 8.1
Paralysis/CP 3.2	Fractures 5.8
Cardiovascular 17.0	Wounds, Burns 2.0
Stroke 5.2	Compl. of Surgery 1.7
Respiratory 7.8	Other Conditions 9.8

**REVENUE**

Billings \$	1,877,644
Disallowances	309,476
Collections	1,568,168
Other	0
Total	1,568,168

**EXPENSES**

Total \$	1,474,814
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	7.5
Licensed Practical Nurses	0.5
Home Health Aides	1.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	31.6
Homemakers	0.0
Other Staff	4.8
TOTAL FTES	47.7

**The Monroe Clinic Home Care**

515 22nd Avenue

Monroe WI 53566

Green County

(608) 324-1230

**COUNTIES SERVED**

Dane

Green

LaFayette

Rock

License Number: 142

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 343

**TOTAL NUMBER OF ADMISSIONS** 306**PERCENT ADMISSIONS FROM:**

Private Residences	14.1%
General Hospitals	71.9
Nursing Homes	10.5
Other	3.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 318

**PERCENT DISCHARGES TO:**

Private Residences	83.0%
General Hospitals	6.3
Nursing Homes	3.8
Deaths	1.9
Other	5.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	259	3,125	12.1
Home Health Aide	70	789	11.3
Physical Therapy	191	1,863	9.8
Spch/Occ/Resp Therapy	51	284	5.6
Medical Social Service	17	32	1.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,093	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.3%	Medicare 68.2%
4 to 34 4.4	Medicaid 3.2
35 to 54 14.3	Other Federal 0.0
55 to 64 12.8	State Funds 0.0
65 to 74 22.2	Private Insurance 25.9
75 to 84 26.8	Self Pay 2.6
85 & over 19.2	Other 0.0
	TOTAL PATIENTS 343

Males 39.4% Females 60.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 2.6%	Digestive Disorders 6.1%		
Cancer 7.9	Genitourinary Sys. 2.9		
Diabetes 1.7	Preg. & Childbirth 0.0		
Diseases of Blood 0.6	Arthropathies 25.4		
Dementia/Alzheimers 0.0	Osteopathies 4.7		
Psychoses/Neuroses 1.2	Perinatal Period 0.0		
Central Nervous Sys. 0.9	Ill-Defined Cond. 6.1		
Paralysis/CP 1.2	Fractures 6.4		
Cardiovascular 12.2	Wounds, Burns 4.1		
Stroke 0.9	Compl. of Surgery 1.7		
Respiratory 5.2	Other Conditions 8.2		

**REVENUE**

Billings \$	874,152
Disallowances	215,159
Collections	658,993
Other	0
Total	658,993

**EXPENSES**

Total \$	812,208
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	4.0
Licensed Practical Nurses	0.0
Home Health Aides	0.5
Physical Therapists	1.3
Occupational Therapists	0.3
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.3
TOTAL FTES	8.8

**CHN Home Care**

270 East Marquette Street  
Berlin WI 54923

Green Lake County

(920) 361-5555

License Number: 235

Ownership of Agency: Nonprofit Association

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 556

**COUNTIES SERVED**

Fond du Lac  
Green Lake  
Marquette  
Waupaca  
Waushara  
Winnebago

**TOTAL NUMBER OF ADMISSIONS** 521

**PERCENT ADMISSIONS FROM:**

Private Residences	7.9%
General Hospitals	66.4
Nursing Homes	2.7
Other	23.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 517

**PERCENT DISCHARGES TO:**

Private Residences	62.9%
General Hospitals	7.4
Nursing Homes	5.0
Deaths	2.1
Other	22.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	556	5,301	9.5
Home Health Aide	222	3,942	17.8
Physical Therapy	245	1,387	5.7
Spch/Occ/Resp Therapy	36	147	4.1
Medical Social Service	10	10	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	73	1,974	27.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,761	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 70.0%
4 to 34 1.8	Medicaid 8.4
35 to 54 7.2	Other Federal 0.0
55 to 64 9.0	State Funds 0.0
65 to 74 18.2	Private Insurance 13.7
75 to 84 33.5	Self Pay 4.1
85 & over 29.1	Other 3.7
	TOTAL PATIENTS 677

Males 37.9% Females 62.1 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.1%	Digestive Disorders 2.2%
Cancer 4.1	Genitourinary Sys. 2.3
Diabetes 5.6	Preg. & Childbirth 0.0
Diseases of Blood 1.6	Arthropathies 7.7
Dementia/Alzheimers 0.5	Osteopathies 1.4
Psychoses/Neuroses 0.5	Perinatal Period 0.0
Central Nervous Sys. 1.1	Ill-Defined Cond. 6.8
Paralysis/CP 0.9	Fractures 6.3
Cardiovascular 16.2	Wounds, Burns 1.3
Stroke 5.2	Compl. of Surgery 4.1
Respiratory 5.0	Other Conditions 25.9

**REVENUE**

Billings \$	1,196,655
Disallowances	-134,365
Collections	1,331,020
Other	84,364
Total	1,415,384

**EXPENSES**

Total \$	1,362,527
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	5.6
Licensed Practical Nurses	0.0
Home Health Aides	4.3
Physical Therapists	1.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.4
TOTAL FTES	15.2

**Upland Hills Home Care**

800 Compassion Way  
Dodgeville WI 53533

Iowa County

(608) 930-7210

License Number: 60

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 334

**COUNTIES SERVED**

Dane  
Grant  
Iowa  
LaFayette  
Richland  
Sauk

**TOTAL NUMBER OF ADMISSIONS** 290

**PERCENT ADMISSIONS FROM:**

Private Residences	32.8%
General Hospitals	50.0
Nursing Homes	11.7
Other	5.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 303

**PERCENT DISCHARGES TO:**

Private Residences	59.1%
General Hospitals	11.2
Nursing Homes	15.8
Deaths	0.7
Other	13.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	310	2,581	8.3
Home Health Aide	56	976	17.4
Physical Therapy	173	942	5.4
Spch/Occ/Resp Therapy	56	164	2.9
Medical Social Service	6	8	1.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	82	4,828	58.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,499	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 65.2%
4 to 34 5.4	Medicaid 7.1
35 to 54 13.8	Other Federal 0.0
55 to 64 8.4	State Funds 2.2
65 to 74 18.0	Private Insurance 21.4
75 to 84 30.2	Self Pay 4.1
85 & over 23.4	Other 0.0
	TOTAL PATIENTS 365

Males 44.9% Females 55.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders 3.3%	Digestive Disorders 4.2%
Cancer 6.0	Genitourinary Sys. 3.3
Diabetes 3.3	Preg. & Childbirth 0.3
Diseases of Blood 3.0	Arthropathies 10.2
Dementia/Alzheimers 0.3	Osteopathies 2.4
Psychoses/Neuroses 0.3	Perinatal Period 0.3
Central Nervous Sys. 3.3	Ill-Defined Cond. 4.2
Paralysis/CP 0.0	Fractures 8.7
Cardiovascular 13.2	Wounds, Burns 4.2
Stroke 2.4	Compl. of Surgery 2.1
Respiratory 4.5	Other Conditions 20.7

**REVENUE**

Billings \$	700,413
Disallowances	-3,190
Collections	703,603
Other	0
Total	703,603

**EXPENSES**

Total \$	870,194
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	3.5
Licensed Practical Nurses	1.2
Home Health Aides	3.9
Physical Therapists	0.3
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.3
Homemakers	0.0
Other Staff	2.8
TOTAL FTES	16.4

**Pine View Home Health**

409 CTH R

Black River Falls WI 54615

Jackson County

(715) 284-9495

**COUNTIES SERVED**

Clark

Jackson

Monroe

Trempealeau

License Number: 219

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 191

**TOTAL NUMBER OF ADMISSIONS** 97**PERCENT ADMISSIONS FROM:**

Private Residences	34.0%
General Hospitals	51.5
Nursing Homes	9.3
Other	5.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 100

**PERCENT DISCHARGES TO:**

Private Residences	68.0%
General Hospitals	7.0
Nursing Homes	17.0
Deaths	1.0
Other	7.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	134	1,387	10.4
Home Health Aide	27	1,883	69.7
Physical Therapy	33	296	9.0
Spch/Occ/Resp Therapy	12	88	7.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	130	14,633	112.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	23	1,128	49.0
TOTAL	XXXXXXX	19,415	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.0%	Medicare 25.7%
4 to 34 5.2	Medicaid 49.2
35 to 54 16.2	Other Federal 0.0
55 to 64 20.9	State Funds 0.0
65 to 74 15.7	Private Insurance 9.4
75 to 84 20.9	Self Pay 15.7
85 & over 19.9	Other 0.0
	TOTAL PATIENTS 191

Males 30.9% Females 69.1 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 2.6%		
Cancer 6.3	Genitourinary Sys. 1.6		
Diabetes 9.9	Preg. & Childbirth 0.0		
Diseases of Blood 2.1	Arthropathies 10.5		
Dementia/Alzheimers 1.6	Osteopathies 3.1		
Psychoses/Neuroses 9.9	Perinatal Period 0.5		
Central Nervous Sys. 7.9	Ill-Defined Cond. 3.1		
Paralysis/CP 3.1	Fractures 3.1		
Cardiovascular 9.4	Wounds, Burns 2.1		
Stroke 5.2	Compl. of Surgery 2.6		
Respiratory 3.7	Other Conditions 11.5		

**REVENUE**

Billings \$	914,262
Disallowances	272,715
Collections	641,547
Other	0
Total	641,547

**EXPENSES**

Total \$	1,122,160
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.0
Licensed Practical Nurses	0.1
Home Health Aides	4.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.3
Homemakers	0.0
Other Staff	4.0
TOTAL FTES	19.7

**Fort Healthcare Home Health**

611 Sherman Avenue East

Fort Atkinson WI 53538

Jefferson County

(920) 568-6500

**COUNTIES SERVED**

Dane

Jefferson

Rock

Walworth

Waukesha

License Number: 137

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 361

**TOTAL NUMBER OF ADMISSIONS** 365**PERCENT ADMISSIONS FROM:**

Private Residences	35.1%
General Hospitals	57.0
Nursing Homes	7.7
Other	0.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 364

**PERCENT DISCHARGES TO:**

Private Residences	81.0%
General Hospitals	2.7
Nursing Homes	1.6
Deaths	1.6
Other	12.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	358	2,267	6.3
Home Health Aide	67	3,475	51.9
Physical Therapy	140	507	3.6
Spch/Occ/Resp Therapy	34	150	4.4
Medical Social Service	36	55	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,454	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 10.8%	Medicare 66.6%
4 to 34 2.5	Medicaid 8.0
35 to 54 9.7	Other Federal 0.0
55 to 64 8.6	State Funds 0.0
65 to 74 18.0	Private Insurance 18.7
75 to 84 26.3	Self Pay 1.2
85 & over 24.1	Other 5.5
	TOTAL PATIENTS 401

Males 40.4% Females 59.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders	0.6%	Digestive Disorders	4.7%
Cancer	7.8	Genitourinary Sys.	3.3
Diabetes	1.4	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	11.9
Dementia/Alzheimers	0.6	Osteopathies	1.1
Psychoses/Neuroses	0.6	Perinatal Period	9.7
Central Nervous Sys.	2.2	Ill-Defined Cond.	5.0
Paralysis/CP	0.8	Fractures	5.5
Cardiovascular	17.2	Wounds, Burns	1.7
Stroke	2.5	Compl. of Surgery	2.8
Respiratory	2.5	Other Conditions	18.3

REVENUE	
Billings \$	630,033
Disallowances	13,280
Collections	616,753
Other	0
Total	616,753

EXPENSES	
Total \$	642,496

**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.4
Licensed Practical Nurses	0.0
Home Health Aides	2.1
Physical Therapists	0.6
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.8
TOTAL FTES	9.2

**Jefferson County Health Department**

N3995 Annex Road  
Jefferson WI 53549

Jefferson County

**COUNTIES SERVED**

Jefferson

(920) 674-7275

License Number: 63

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 114

**TOTAL NUMBER OF ADMISSIONS** 85**PERCENT ADMISSIONS FROM:**

Private Residences	52.9%
General Hospitals	36.5
Nursing Homes	8.2
Other	2.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 91

**PERCENT DISCHARGES TO:**

Private Residences	64.8%
General Hospitals	6.6
Nursing Homes	7.7
Deaths	1.1
Other	19.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	91	1,398	15.4
Home Health Aide	41	1,775	43.3
Physical Therapy	51	453	8.9
Spch/Occ/Resp Therapy	23	163	7.1
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,789	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.8%	Medicare 42.1%
4 to 34 9.6	Medicaid 42.1
35 to 54 16.7	Other Federal 0.0
55 to 64 5.3	State Funds 0.0
65 to 74 21.1	Private Insurance 12.7
75 to 84 22.8	Self Pay 2.4
85 & over 22.8	Other 0.8
	TOTAL PATIENTS 126

Males 36.0% Females 64.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 2.6%		
Cancer 0.0	Genitourinary Sys. 1.8		
Diabetes 0.0	Preg. & Childbirth 0.9		
Diseases of Blood 1.8	Arthropathies 12.3		
Dementia/Alzheimers 0.9	Osteopathies 0.0		
Psychoses/Neuroses 4.4	Perinatal Period 0.0		
Central Nervous Sys. 2.6	Ill-Defined Cond. 9.6		
Paralysis/CP 0.0	Fractures 5.3		
Cardiovascular 14.9	Wounds, Burns 7.9		
Stroke 2.6	Compl. of Surgery 0.0		
Respiratory 0.9	Other Conditions 31.6		

**REVENUE**

Billings \$	597,653
Disallowances	248,122
Collections	349,531
Other	0
Total	349,531

**EXPENSES**

Total \$	592,950
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**STAFFING****FTES**

Administrators	0.3
Reg. Nurse Supervisors	0.5
Registered Nurses	2.0
Licensed Practical Nurses	0.5
Home Health Aides	1.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTES	6.0



**KJM Home Health Care Agency**

111 North Third Street  
Watertown WI 53094

Jefferson County

**COUNTIES SERVED**

Dodge  
Jefferson

(920) 261-8789

License Number: 135

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 12

**TOTAL NUMBER OF ADMISSIONS** 7

**PERCENT ADMISSIONS FROM:**

Private Residences	14.3%
General Hospitals	28.6
Nursing Homes	28.6
Other	28.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	25.0%
General Hospitals	37.5
Nursing Homes	0.0
Deaths	12.5
Other	25.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	12	300	25.0
Home Health Aide	4	487	121.8
Physical Therapy	2	20	10.0
Spch/Occ/Resp Therapy	1	11	11.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	76	38.0
TOTAL	XXXXXXX	894	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 66.7%
4 to 34 25.0	Medicaid 25.0
35 to 54 25.0	Other Federal 0.0
55 to 64 8.3	State Funds 0.0
65 to 74 25.0	Private Insurance 8.3
75 to 84 16.7	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 12

Males 41.7% Females 58.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 8.3%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 16.7
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 33.3
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 8.3	Other Conditions 33.3

**REVENUE**

Billings \$	111,011
Disallowances	8,495
Collections	102,516
Other	0
Total	102,516

**EXPENSES**

Total \$	107,858
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.3
Licensed Practical Nurses	0.0
Home Health Aides	0.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	3.3

**Hess Home Health**

1050 Division Street  
Mauston WI 53948

Juneau County

(608) 847-6161

**COUNTIES SERVED**

Adams  
Jackson  
Juneau  
Monroe

License Number: 216

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 174

**TOTAL NUMBER OF ADMISSIONS** 174

**PERCENT ADMISSIONS FROM:**

Private Residences	20.7%
General Hospitals	62.1
Nursing Homes	12.6
Other	4.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 155

**PERCENT DISCHARGES TO:**

Private Residences	75.5%
General Hospitals	5.8
Nursing Homes	3.2
Deaths	6.5
Other	9.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	145	2,199	15.2
Home Health Aide	61	1,713	28.1
Physical Therapy	53	333	6.3
Spch/Occ/Resp Therapy	2	5	2.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,250	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 86.2%
4 to 34 0.0	Medicaid 1.7
35 to 54 4.6	Other Federal 0.0
55 to 64 7.5	State Funds 0.0
65 to 74 25.9	Private Insurance 7.5
75 to 84 36.8	Self Pay 4.0
85 & over 25.3	Other 0.6
	TOTAL PATIENTS 174

Males 44.3% Females 55.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.1%	Digestive Disorders 0.0%
Cancer 8.6	Genitourinary Sys. 0.0
Diabetes 7.5	Preg. & Childbirth 0.0
Diseases of Blood 2.3	Arthropathies 10.3
Dementia/Alzheimers 0.0	Osteopathies 1.7
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 9.8
Cardiovascular 14.4	Wounds, Burns 8.0
Stroke 1.7	Compl. of Surgery 2.9
Respiratory 18.4	Other Conditions 13.2

**REVENUE**

Billings \$	393,706
Disallowances	15,410
Collections	378,296
Other	0
Total	378,296

**EXPENSES**

Total \$	451,601
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.7
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.4
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	6.2

**Kenosha VNA, Inc.**

600 52nd Street, Suite 300  
Kenosha WI 53140

Kenosha County

**COUNTIES SERVED**

Kenosha  
Racine

(262) 656-8400

License Number: 65

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 657

**TOTAL NUMBER OF ADMISSIONS** 611**PERCENT ADMISSIONS FROM:**

Private Residences	10.3%
General Hospitals	60.1
Nursing Homes	10.1
Other	19.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 591

**PERCENT DISCHARGES TO:**

Private Residences	79.4%
General Hospitals	7.1
Nursing Homes	5.4
Deaths	0.5
Other	7.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	570	6,024	10.6
Home Health Aide	147	3,004	20.4
Physical Therapy	301	3,268	10.9
Spch/Occ/Resp Therapy	61	409	6.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	7	7	1.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,712	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.4%	Medicare 79.9%
4 to 34 3.0	Medicaid 4.5
35 to 54 9.3	Other Federal 0.0
55 to 64 8.8	State Funds 0.0
65 to 74 20.1	Private Insurance 15.4
75 to 84 35.3	Self Pay 0.2
85 & over 22.1	Other 0.0
	TOTAL PATIENTS 662

Males 34.7% Females 65.3 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.2%	Digestive Disorders 3.5%		
Cancer 5.0	Genitourinary Sys. 2.9		
Diabetes 4.3	Preg. & Childbirth 0.5		
Diseases of Blood 1.1	Arthropathies 14.6		
Dementia/Alzheimers 0.2	Osteopathies 0.6		
Psychoses/Neuroses 0.3	Perinatal Period 0.5		
Central Nervous Sys. 1.5	Ill-Defined Cond. 5.0		
Paralysis/CP 0.0	Fractures 4.9		
Cardiovascular 16.7	Wounds, Burns 2.0		
Stroke 2.0	Compl. of Surgery 2.6		
Respiratory 3.8	Other Conditions 28.0		

**REVENUE**

Billings \$	1,750,345
Disallowances	133,089
Collections	1,617,256
Other	160,723
Total	1,777,979

**EXPENSES**

Total \$	1,756,225
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.5
Licensed Practical Nurses	1.0
Home Health Aides	3.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	8.0
TOTAL FTES	19.6

**Alliance Home Care**

10220 Prairie Ridge Road  
Pleasant Prairie WI 53158

Kenosha County

**COUNTIES SERVED**

Kenosha  
Racine

(262) 652-4400

License Number: 130

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 22

**TOTAL NUMBER OF ADMISSIONS** 19

**PERCENT ADMISSIONS FROM:**

Private Residences	10.5%
General Hospitals	10.5
Nursing Homes	0.0
Other	78.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 19

**PERCENT DISCHARGES TO:**

Private Residences	42.1%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	21.1
Other	36.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	22	147	6.7
Home Health Aide	6	43	7.2
Physical Therapy	4	14	3.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	7	9	1.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	213	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.5%	Medicare 62.5%
4 to 34 4.5	Medicaid 16.7
35 to 54 9.1	Other Federal 0.0
55 to 64 13.6	State Funds 0.0
65 to 74 27.3	Private Insurance 12.5
75 to 84 31.8	Self Pay 8.3
85 & over 9.1	Other 0.0
	TOTAL PATIENTS 24

Males 45.5% Females 54.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 68.2	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 4.5
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 13.6	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 4.5
Respiratory 0.0	Other Conditions 9.1

**REVENUE**

Billings \$	48,461
Disallowances	5,725
Collections	42,736
Other	0
Total	42,736

**EXPENSES**

Total \$	231,132
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	1.7
Licensed Practical Nurses	0.2
Home Health Aides	1.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.5
Other Therapeutic Staff	0.3
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTES	5.9

**Caregivers La Crosse, Inc.**

1802 State Road 19

La Crosse WI 54601

La Crosse County

(608) 779-0900

License Number: 1028

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 141

**COUNTIES SERVED**

Eau Claire

Juneau

LaCrosse

Monroe

Trempealeau

Vernon

**TOTAL NUMBER OF ADMISSIONS** 151**PERCENT ADMISSIONS FROM:**

Private Residences	87.4%
General Hospitals	7.3
Nursing Homes	4.0
Other	1.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 59

**PERCENT DISCHARGES TO:**

Private Residences	35.6%
General Hospitals	16.9
Nursing Homes	27.1
Deaths	18.6
Other	1.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	75	1,647	22.0
Home Health Aide	37	7,395	199.9
Physical Therapy	5	13	2.6
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	17	1,688	99.3
Personal Care/PC RN Supv.	78	3,706	47.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,449	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.5%	Medicare 2.1%
4 to 34 22.7	Medicaid 49.6
35 to 54 20.6	Other Federal 0.0
55 to 64 7.1	State Funds 39.7
65 to 74 16.3	Private Insurance 8.5
75 to 84 15.6	Self Pay 0.0
85 & over 14.2	Other 0.0
	TOTAL PATIENTS 141

Males 37.6% Females 62.4 %

PRIMARY DIAGNOSIS			
Infectious Disorders 2.8%	Digestive Disorders 2.1%		
Cancer 2.8	Genitourinary Sys. 3.5		
Diabetes 7.8	Preg. & Childbirth 0.0		
Diseases of Blood 0.7	Arthropathies 9.9		
Dementia/Alzheimers 0.7	Osteopathies 0.7		
Psychoses/Neuroses 3.5	Perinatal Period 0.7		
Central Nervous Sys. 2.8	Ill-Defined Cond. 5.0		
Paralysis/CP 12.1	Fractures 2.1		
Cardiovascular 6.4	Wounds, Burns 2.8		
Stroke 2.8	Compl. of Surgery 0.0		
Respiratory 5.7	Other Conditions 24.8		

**REVENUE**

Billings \$	1,110,378
Disallowances	111,768
Collections	998,610
Other	0
Total	998,610

**EXPENSES**

Total \$	1,044,022
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**STAFFING****FTES**

Administrators	0.4
Reg. Nurse Supervisors	4.2
Registered Nurses	1.5
Licensed Practical Nurses	6.0
Home Health Aides	8.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	9.5
Homemakers	7.8
Other Staff	4.0
TOTAL FTES	41.9

**Franciscan Skemp Medical Center HHS**

212 South 11th Street

La Crosse WI 54601

La Crosse County

(608) 791-9790

**COUNTIES SERVED**

LaCrosse

Monroe

Trempealeau

Vernon

License Number: 141

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 344

**TOTAL NUMBER OF ADMISSIONS** 319**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	31.0
Nursing Homes	23.8
Other	45.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 329

**PERCENT DISCHARGES TO:**

Private Residences	72.6%
General Hospitals	3.6
Nursing Homes	9.4
Deaths	2.7
Other	11.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	251	4,790	19.1
Home Health Aide	80	4,083	51.0
Physical Therapy	173	1,338	7.7
Spch/Occ/Resp Therapy	91	536	5.9
Medical Social Service	9	9	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,756	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.2%	Medicare 58.4%
4 to 34 5.8	Medicaid 23.6
35 to 54 14.5	Other Federal 0.0
55 to 64 13.7	State Funds 0.0
65 to 74 11.6	Private Insurance 17.3
75 to 84 29.4	Self Pay 0.5
85 & over 23.8	Other 0.3
	TOTAL PATIENTS 382

Males 37.2% Females 62.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 2.0%	Digestive Disorders 2.9%		
Cancer 9.0	Genitourinary Sys. 1.7		
Diabetes 6.4	Preg. & Childbirth 0.9		
Diseases of Blood 0.3	Arthropathies 8.7		
Dementia/Alzheimers 0.0	Osteopathies 2.9		
Psychoses/Neuroses 0.3	Perinatal Period 0.6		
Central Nervous Sys. 2.6	Ill-Defined Cond. 8.7		
Paralysis/CP 1.5	Fractures 4.4		
Cardiovascular 11.3	Wounds, Burns 2.3		
Stroke 3.5	Compl. of Surgery 4.4		
Respiratory 6.7	Other Conditions 18.9		

**REVENUE**

Billings \$	1,074,342
Disallowances	220,035
Collections	854,307
Other	2,716
Total	857,023

**EXPENSES**

Total \$	1,127,865
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.2
Licensed Practical Nurses	0.0
Home Health Aides	5.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	5.4
TOTAL FTEs	17.2

**Gundersen Lutheran Medical Center, Inc.**

La Crosse

La Crosse WI 54603

La Crosse County

(608) 775-8400

License Number: 1027

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 168

**COUNTIES SERVED**

Crawford

Jackson

Juneau

LaCrosse

Monroe

Trempealeau

Vernon

**TOTAL NUMBER OF ADMISSIONS** 173**PERCENT ADMISSIONS FROM:**

Private Residences	22.5%
General Hospitals	61.3
Nursing Homes	4.0
Other	12.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 143

**PERCENT DISCHARGES TO:**

Private Residences	81.1%
General Hospitals	0.7
Nursing Homes	4.9
Deaths	3.5
Other	9.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	151	1,587	10.5
Home Health Aide	28	360	12.9
Physical Therapy	49	155	3.2
Spch/Occ/Resp Therapy	30	99	3.3
Medical Social Service	13	14	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,215	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 14.3%	Medicare 65.3%
4 to 34 11.9	Medicaid 11.0
35 to 54 9.5	Other Federal 0.0
55 to 64 8.3	State Funds 0.0
65 to 74 12.5	Private Insurance 22.5
75 to 84 27.4	Self Pay 1.2
85 & over 16.1	Other 0.0
	TOTAL PATIENTS 173

Males 38.1% Females 61.9 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.6%	Digestive Disorders 4.2%
Cancer 10.1	Genitourinary Sys. 3.0
Diabetes 1.8	Preg. & Childbirth 1.2
Diseases of Blood 0.6	Arthropathies 4.2
Dementia/Alzheimers 0.0	Osteopathies 0.6
Psychoses/Neuroses 1.2	Perinatal Period 9.5
Central Nervous Sys. 0.0	Ill-Defined Cond. 3.6
Paralysis/CP 0.0	Fractures 3.0
Cardiovascular 13.7	Wounds, Burns 3.0
Stroke 1.8	Compl. of Surgery 8.9
Respiratory 1.2	Other Conditions 28.0

**REVENUE**

Billings \$	251,257
Disallowances	29,293
Collections	221,964
Other	0
Total	221,964

**EXPENSES**

Total \$	650,415
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.6
Licensed Practical Nurses	0.0
Home Health Aides	2.8
Physical Therapists	0.9
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.3
TOTAL FTES	14.2

**La Crosse County Health Department**

300 4th Street N  
La Crosse WI 54601

La Crosse County

**COUNTIES SERVED**

LaCrosse  
Vernon

(608) 785-9723

License Number: 66  
Ownership of Agency: County  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 93

**TOTAL NUMBER OF ADMISSIONS** 39

**PERCENT ADMISSIONS FROM:**

Private Residences	38.5%
General Hospitals	20.5
Nursing Homes	5.1
Other	35.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 39

**PERCENT DISCHARGES TO:**

Private Residences	30.8%
General Hospitals	7.7
Nursing Homes	15.4
Deaths	12.8
Other	33.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	56	2,162	38.6
Home Health Aide	45	5,702	126.7
Physical Therapy	9	103	11.4
Spch/Occ/Resp Therapy	3	31	10.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	58	3,678	63.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,676	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 38.9%
4 to 34 20.4	Medicaid 6.2
35 to 54 19.4	Other Federal 0.0
55 to 64 12.9	State Funds 36.3
65 to 74 16.1	Private Insurance 3.5
75 to 84 9.7	Self Pay 15.0
85 & over 19.4	Other 0.0
	TOTAL PATIENTS 113

Males 61.3% Females 38.7 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.1%	Digestive Disorders 2.2%		
Cancer 1.1	Genitourinary Sys. 4.3		
Diabetes 2.2	Preg. & Childbirth 0.0		
Diseases of Blood 1.1	Arthropathies 3.2		
Dementia/Alzheimers 1.1	Osteopathies 2.2		
Psychoses/Neuroses 3.2	Perinatal Period 0.0		
Central Nervous Sys. 7.5	Ill-Defined Cond. 2.2		
Paralysis/CP 11.8	Fractures 1.1		
Cardiovascular 10.8	Wounds, Burns 6.5		
Stroke 1.1	Compl. of Surgery 0.0		
Respiratory 6.5	Other Conditions 31.2		

**REVENUE**

Billings \$	958,322
Disallowances	248,644
Collections	709,678
Other	0
Total	709,678

**EXPENSES**

Total \$	740,913
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.6
Licensed Practical Nurses	0.0
Home Health Aides	5.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.5
TOTAL FTES	14.1



**Lafayette County Nursing Agency**

729 Clay Street, PO Box 118

Darlington WI 53530

Lafayette County

**COUNTIES SERVED**

LaFayette

(608) 776-4235

License Number: 68

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 136

**TOTAL NUMBER OF ADMISSIONS** 110**PERCENT ADMISSIONS FROM:**

Private Residences	50.0%
General Hospitals	40.0
Nursing Homes	9.1
Other	0.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 112

**PERCENT DISCHARGES TO:**

Private Residences	57.1%
General Hospitals	3.6
Nursing Homes	12.5
Deaths	10.7
Other	16.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	128	1,803	14.1
Home Health Aide	30	836	27.9
Physical Therapy	43	127	3.0
Spch/Occ/Resp Therapy	7	10	1.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	38	679	17.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,455	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.7%	Medicare 65.9%
4 to 34 2.9	Medicaid 17.4
35 to 54 9.6	Other Federal 0.0
55 to 64 7.4	State Funds 0.0
65 to 74 19.9	Private Insurance 12.3
75 to 84 29.4	Self Pay 4.3
85 & over 30.1	Other 0.0
	TOTAL PATIENTS 138

Males 39.0% Females 61.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.5%	Digestive Disorders 0.7%		
Cancer 10.3	Genitourinary Sys. 1.5		
Diabetes 5.1	Preg. & Childbirth 0.0		
Diseases of Blood 5.9	Arthropathies 18.4		
Dementia/Alzheimers 0.0	Osteopathies 0.7		
Psychoses/Neuroses 1.5	Perinatal Period 0.7		
Central Nervous Sys. 2.2	Ill-Defined Cond. 4.4		
Paralysis/CP 0.7	Fractures 1.5		
Cardiovascular 25.0	Wounds, Burns 1.5		
Stroke 2.2	Compl. of Surgery 1.5		
Respiratory 5.1	Other Conditions 9.6		

**REVENUE**

Billings \$	229,470
Disallowances	28,662
Collections	200,808
Other	753
Total	201,561

**EXPENSES**

Total \$	357,828
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	3.5
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	9.0

**Langlade County Health Department**

1225 Langlade Road

Antigo WI 54409

Langlade County

**COUNTIES SERVED**

Langlade

(715) 627-6250

License Number: 69

Ownership of Agency: County

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 75

**TOTAL NUMBER OF ADMISSIONS** 24**PERCENT ADMISSIONS FROM:**

Private Residences	45.8%
General Hospitals	4.2
Nursing Homes	0.0
Other	50.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 36

**PERCENT DISCHARGES TO:**

Private Residences	27.8%
General Hospitals	11.1
Nursing Homes	41.7
Deaths	8.3
Other	11.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	75	280	3.7
Home Health Aide	0	0	0.0
Physical Therapy	2	2	1.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	142	12,566	88.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,848	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT	SOURCE
Under 4	0.0%	Medicare
4 to 34	9.3	Medicaid
35 to 54	6.7	Other Federal
55 to 64	9.3	State Funds
65 to 74	6.7	Private Insurance
75 to 84	26.7	Self Pay
85 & over	41.3	Other
		TOTAL PATIENTS

Males 26.7% Females 73.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders	0.0%
Cancer	4.0
Diabetes	4.0
Diseases of Blood	0.0
Dementia/Alzheimers	13.3
Psychoses/Neuroses	1.3
Central Nervous Sys.	6.7
Paralysis/CP	8.0
Cardiovascular	12.0
Stroke	10.7
Respiratory	4.0

REVENUE	
Digestive Disorders	0.0%
Genitourinary Sys.	0.0
Preg. & Childbirth	0.0
Arthropathies	21.3
Osteopathies	2.7
Perinatal Period	0.0
Ill-Defined Cond.	2.7
Fractures	5.3
Wounds, Burns	2.7
Compl. of Surgery	0.0
Other Conditions	1.3

REVENUE	
Billings \$	257,076
Disallowances	11,282
Collections	245,794
Other	0
Total	245,794

EXPENSES	
Total \$	530,836

**STAFFING****FTES**

Administrators	2.0
Reg. Nurse Supervisors	0.0
Registered Nurses	7.1
Licensed Practical Nurses	0.0
Home Health Aides	3.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTES	15.1

**Holy Family Memorial Home Care**

333 Reed Avenue, PO Box 1450

Manitowoc WI 54220

Manitowoc County

**COUNTIES SERVED**

Kewaunee

Manitowoc

(920) 683-8441

License Number: 143

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 433

**TOTAL NUMBER OF ADMISSIONS** 361**PERCENT ADMISSIONS FROM:**

Private Residences	32.4%
General Hospitals	47.9
Nursing Homes	16.1
Other	3.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 358

**PERCENT DISCHARGES TO:**

Private Residences	72.9%
General Hospitals	7.3
Nursing Homes	6.1
Deaths	3.6
Other	10.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	433	4,302	9.9
Home Health Aide	93	3,339	35.9
Physical Therapy	117	909	7.8
Spch/Occ/Resp Therapy	54	164	3.0
Medical Social Service	2	3	1.5
Private Duty Nursing	1	260	260.0
Personal Care/PC RN Supv.	128	9,220	72.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	18,197	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 72.1%
4 to 34 6.7	Medicaid 15.5
35 to 54 10.4	Other Federal 0.0
55 to 64 8.5	State Funds 0.0
65 to 74 15.9	Private Insurance 12.0
75 to 84 33.7	Self Pay 0.4
85 & over 24.2	Other 0.0
	TOTAL PATIENTS 451

Males 38.3% Females 61.7 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.2%	Digestive Disorders 4.2%		
Cancer 7.2	Genitourinary Sys. 1.4		
Diabetes 6.7	Preg. & Childbirth 0.7		
Diseases of Blood 1.4	Arthropathies 9.7		
Dementia/Alzheimers 0.2	Osteopathies 1.8		
Psychoses/Neuroses 0.9	Perinatal Period 0.5		
Central Nervous Sys. 3.2	Ill-Defined Cond. 6.7		
Paralysis/CP 3.0	Fractures 4.8		
Cardiovascular 22.6	Wounds, Burns 0.5		
Stroke 1.2	Compl. of Surgery 3.5		
Respiratory 4.2	Other Conditions 15.5		

**REVENUE**

Billings \$	1,385,147
Disallowances	166,894
Collections	1,218,253
Other	0
Total	1,218,253

**EXPENSES**

Total \$	1,363,165
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.8
Registered Nurses	6.0
Licensed Practical Nurses	0.7
Home Health Aides	6.1
Physical Therapists	0.8
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.3
Personal Care Workers	5.0
Homemakers	0.0
Other Staff	2.9
TOTAL FTES	24.6

**Homecare Health Services, Inc.**

1004 Washington Street

Manitowoc WI 54220

Manitowoc County

**COUNTIES SERVED**

Manitowoc

(920) 684-7155

License Number: 1

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 92

**TOTAL NUMBER OF ADMISSIONS** 86**PERCENT ADMISSIONS FROM:**

Private Residences	62.8%
General Hospitals	24.4
Nursing Homes	2.3
Other	10.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 87

**PERCENT DISCHARGES TO:**

Private Residences	65.5%
General Hospitals	18.4
Nursing Homes	6.9
Deaths	1.1
Other	8.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	41	653	15.9
Home Health Aide	23	795	34.6
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	101	7,339	72.7
Other Home Health Care	3	98	32.7
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,885	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 39.8%
4 to 34 7.6	Medicaid 56.3
35 to 54 9.8	Other Federal 0.0
55 to 64 7.6	State Funds 0.0
65 to 74 14.1	Private Insurance 1.0
75 to 84 27.2	Self Pay 1.0
85 & over 33.7	Other 1.9
	TOTAL PATIENTS 103

Males 22.8% Females 77.2 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.1%	Digestive Disorders 3.3%		
Cancer 3.3	Genitourinary Sys. 4.3		
Diabetes 7.6	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 6.5		
Dementia/Alzheimers 4.3	Osteopathies 0.0		
Psychoses/Neuroses 5.4	Perinatal Period 0.0		
Central Nervous Sys. 5.4	Ill-Defined Cond. 6.5		
Paralysis/CP 4.3	Fractures 2.2		
Cardiovascular 17.4	Wounds, Burns 3.3		
Stroke 3.3	Compl. of Surgery 0.0		
Respiratory 7.6	Other Conditions 14.1		

REVENUE	
Billings \$	320,984
Disallowances	56,560
Collections	264,424
Other	2,514
Total	266,938

EXPENSES	
Total \$	295,398

**STAFFING FTES**

Administrators	0.3
Reg. Nurse Supervisors	0.4
Registered Nurses	0.5
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.8
Homemakers	0.0
Other Staff	0.8
TOTAL FTES	5.9

**Interim Healthcare**

2402 Grand Avenue  
Wausau WI 54403

Marathon County

(715) 842-7707

**COUNTIES SERVED**

Lincoln  
Marathon  
Portage  
Shawano

License Number: 277

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 149

**TOTAL NUMBER OF ADMISSIONS** 137

**PERCENT ADMISSIONS FROM:**

Private Residences	30.7%
General Hospitals	56.2
Nursing Homes	11.7
Other	1.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 144

**PERCENT DISCHARGES TO:**

Private Residences	61.8%
General Hospitals	27.8
Nursing Homes	8.3
Deaths	0.7
Other	1.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	94	1,977	21.0
Home Health Aide	28	2,482	88.6
Physical Therapy	67	822	12.3
Spch/Occ/Resp Therapy	16	91	5.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	34	1,196	35.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,568	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.0%	Medicare 68.5%
4 to 34 5.4	Medicaid 22.1
35 to 54 8.7	Other Federal 0.0
55 to 64 3.4	State Funds 0.0
65 to 74 13.4	Private Insurance 8.1
75 to 84 36.2	Self Pay 1.3
85 & over 30.9	Other 0.0
	TOTAL PATIENTS 149

Males 34.9% Females 65.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.3%	Digestive Disorders 4.0%
Cancer 1.3	Genitourinary Sys. 0.0
Diabetes 3.4	Preg. & Childbirth 0.7
Diseases of Blood 0.7	Arthropathies 8.1
Dementia/Alzheimers 1.3	Osteopathies 2.7
Psychoses/Neuroses 0.7	Perinatal Period 1.3
Central Nervous Sys. 4.7	Ill-Defined Cond. 8.1
Paralysis/CP 4.7	Fractures 6.0
Cardiovascular 10.1	Wounds, Burns 3.4
Stroke 1.3	Compl. of Surgery 0.0
Respiratory 4.7	Other Conditions 31.5

**REVENUE**

Billings \$	557,686
Disallowances	4,939
Collections	552,747
Other	2
Total	552,749

**EXPENSES**

Total \$	620,798
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.9
Licensed Practical Nurses	0.0
Home Health Aides	1.7
Physical Therapists	0.4
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.2
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	8.2

**VNA Home Health, Inc.**

520 North 32nd Avenue  
Wausau WI 54401

Marathon County

(715) 847-2600

License Number: 73

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 2,133

**COUNTIES SERVED**

Adams  
Clark  
Langlade  
Lincoln  
Marathon  
Oconto  
Oneida  
Portage  
Price  
Shawano  
Taylor  
Washburn  
Wood

**TOTAL NUMBER OF ADMISSIONS** 1,856

**PERCENT ADMISSIONS FROM:**

Private Residences	34.9%
General Hospitals	54.0
Nursing Homes	8.6
Other	2.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,882

**PERCENT DISCHARGES TO:**

Private Residences	83.0%
General Hospitals	7.3
Nursing Homes	2.3
Deaths	2.1
Other	5.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,550	23,362	15.1
Home Health Aide	429	35,712	83.2
Physical Therapy	603	2,784	4.6
Spch/Occ/Resp Therapy	290	1,395	4.8
Medical Social Service	1	1	1.0
Private Duty Nursing	18	1,172	65.1
Personal Care/PC RN Supv.	375	22,438	59.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	86,864	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.0%	Medicare 47.7%
4 to 34 6.0	Medicaid 25.5
35 to 54 12.0	Other Federal 0.0
55 to 64 9.0	State Funds 1.9
65 to 74 15.0	Private Insurance 21.7
75 to 84 27.1	Self Pay 3.2
85 & over 23.0	Other 0.0
	TOTAL PATIENTS 2,218

Males 40.0% Females 60.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.9%	Digestive Disorders 4.5%
Cancer 7.8	Genitourinary Sys. 2.7
Diabetes 0.0	Preg. & Childbirth 0.1
Diseases of Blood 1.9	Arthropathies 9.8
Dementia/Alzheimers 0.0	Osteopathies 2.3
Psychoses/Neuroses 1.3	Perinatal Period 7.5
Central Nervous Sys. 4.6	Ill-Defined Cond. 7.2
Paralysis/CP 0.4	Fractures 6.2
Cardiovascular 17.1	Wounds, Burns 5.8
Stroke 2.3	Compl. of Surgery 1.6
Respiratory 4.7	Other Conditions 11.2

**REVENUE**

Billings \$	6,976,226
Disallowances	1,056,394
Collections	5,919,832
Other	143,930
Total	6,063,762

**EXPENSES**

Total \$	5,796,925
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**STAFFING****FTEs**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	30.7
Licensed Practical Nurses	2.0
Home Health Aides	28.1
Physical Therapists	5.9
Occupational Therapists	1.8
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	9.0
Homemakers	0.0
Other Staff	31.1
TOTAL FTEs	109.5

**Caregivers Home Health**

3900 Hall Avenue, Suite A  
Marinette WI 54143

Marinette County

**COUNTIES SERVED**

Marinette

(715) 735-6490

License Number: 1005

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 127

**TOTAL NUMBER OF ADMISSIONS** 42

**PERCENT ADMISSIONS FROM:**

Private Residences	54.8%
General Hospitals	11.9
Nursing Homes	14.3
Other	19.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 43

**PERCENT DISCHARGES TO:**

Private Residences	55.8%
General Hospitals	9.3
Nursing Homes	18.6
Deaths	9.3
Other	7.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	68	1,296	19.1
Home Health Aide	47	4,848	103.1
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	4	273	68.3
Personal Care/PC RN Supv.	118	14,849	125.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	13	6.5
TOTAL	XXXXXXX	21,279	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 0.0%
4 to 34 2.4	Medicaid 63.3
35 to 54 2.4	Other Federal 0.0
55 to 64 10.2	State Funds 0.0
65 to 74 60.6	Private Insurance 36.7
75 to 84 16.5	Self Pay 0.0
85 & over 7.1	Other 0.0
	TOTAL PATIENTS 180

Males 32.3% Females 67.7 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 5.5	Genitourinary Sys. 0.0		
Diabetes 20.5	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 0.0		
Dementia/Alzheimers 21.3	Osteopathies 5.5		
Psychoses/Neuroses 0.8	Perinatal Period 0.0		
Central Nervous Sys. 0.8	Ill-Defined Cond. 0.0		
Paralysis/CP 3.9	Fractures 0.0		
Cardiovascular 1.6	Wounds, Burns 0.0		
Stroke 24.4	Compl. of Surgery 0.0		
Respiratory 12.6	Other Conditions 3.1		

**REVENUE**

Billings \$	1,034,901
Disallowances	215,081
Collections	819,820
Other	0
Total	819,820

**EXPENSES**

Total \$	805,837
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	1.5
Registered Nurses	1.5
Licensed Practical Nurses	0.4
Home Health Aides	5.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	17.8
Homemakers	3.1
Other Staff	1.8
TOTAL FTES	32.5

**Northland Lutheran Home Health Services, Inc.**  
 925 Pine Beach Road  
 Marinette WI 54143                      Marinette County

**COUNTIES SERVED**  
 Marinette

(715) 732-5670

License Number: 256  
 Ownership of Agency: Nonprofit Church/Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 312

**TOTAL NUMBER OF ADMISSIONS** 320

**PERCENT ADMISSIONS FROM:**

Private Residences	30.3%
General Hospitals	59.1
Nursing Homes	10.3
Other	0.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 303

**PERCENT DISCHARGES TO:**

Private Residences	81.2%
General Hospitals	2.0
Nursing Homes	7.3
Deaths	6.9
Other	2.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	312	3,745	12.0
Home Health Aide	115	2,437	21.2
Physical Therapy	88	681	7.7
Spch/Occ/Resp Therapy	34	226	6.6
Medical Social Service	1	2	2.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	44	939	21.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,030	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 77.0%
4 to 34 1.9	Medicaid 4.5
35 to 54 6.1	Other Federal 0.0
55 to 64 9.0	State Funds 0.0
65 to 74 17.0	Private Insurance 10.6
75 to 84 37.2	Self Pay 7.9
85 & over 28.8	Other 0.0
	TOTAL PATIENTS 331

Males 34.0%      Females 66.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.6%	Digestive Disorders 6.7%
Cancer 8.7	Genitourinary Sys. 2.2
Diabetes 6.4	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 7.4
Dementia/Alzheimers 0.6	Osteopathies 0.6
Psychoses/Neuroses 0.6	Perinatal Period 0.3
Central Nervous Sys. 2.6	Ill-Defined Cond. 7.7
Paralysis/CP 0.0	Fractures 5.8
Cardiovascular 17.0	Wounds, Burns 1.0
Stroke 5.4	Compl. of Surgery 2.6
Respiratory 5.1	Other Conditions 16.7

**REVENUE**

Billings \$	669,658
Disallowances	7,036
Collections	662,622
Other	5,702
Total	668,324

**EXPENSES**

Total \$	744,219
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**STAFFING**

**FTES**

Administrators	0.9
Reg. Nurse Supervisors	0.9
Registered Nurses	5.6
Licensed Practical Nurses	0.0
Home Health Aides	3.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	1.6
TOTAL FTES	12.3



**Northland Home Health Agency**

629 South Charles Street

Westfield WI 53964

Marquette County

**COUNTIES SERVED**

Adams

Marquette

Waushara

(608) 296-3811

License Number: 241

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 188

**TOTAL NUMBER OF ADMISSIONS** 181**PERCENT ADMISSIONS FROM:**

Private Residences	45.3%
General Hospitals	42.0
Nursing Homes	10.5
Other	2.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 189

**PERCENT DISCHARGES TO:**

Private Residences	61.4%
General Hospitals	28.0
Nursing Homes	4.2
Deaths	3.2
Other	3.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	183	4,685	25.6
Home Health Aide	81	3,927	48.5
Physical Therapy	95	639	6.7
Spch/Occ/Resp Therapy	52	239	4.6
Medical Social Service	14	34	2.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	80	3,793	47.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,317	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.6%	Medicare 67.4%
4 to 34 2.1	Medicaid 21.1
35 to 54 9.6	Other Federal 4.1
55 to 64 9.0	State Funds 0.0
65 to 74 19.1	Private Insurance 2.8
75 to 84 28.7	Self Pay 4.1
85 & over 29.8	Other 0.5
	TOTAL PATIENTS 218

Males 37.2% Females 62.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.5%	Digestive Disorders 6.4%		
Cancer 6.9	Genitourinary Sys. 2.7		
Diabetes 6.9	Preg. & Childbirth 0.0		
Diseases of Blood 1.1	Arthropathies 17.6		
Dementia/Alzheimers 1.1	Osteopathies 1.6		
Psychoses/Neuroses 1.6	Perinatal Period 1.1		
Central Nervous Sys. 3.7	Ill-Defined Cond. 5.3		
Paralysis/CP 3.2	Fractures 9.6		
Cardiovascular 14.9	Wounds, Burns 1.6		
Stroke 3.2	Compl. of Surgery 2.7		
Respiratory 7.4	Other Conditions 1.1		

**REVENUE**

Billings \$	985,527
Disallowances	198,171
Collections	787,356
Other	0
Total	787,356

**EXPENSES**

Total \$	832,899
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.5
Registered Nurses	4.6
Licensed Practical Nurses	0.2
Home Health Aides	4.1
Physical Therapists	0.6
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.6
Homemakers	0.0
Other Staff	3.1
TOTAL FTES	17.9

**Horizon Home Care & Hospice**

8949 North Deerbrook Trail

Brown Deer WI 53223

Milwaukee County

(414) 365-8300

License Number: 150

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 4,688

**COUNTIES SERVED**

Dodge

Kenosha

Milwaukee

Ozaukee

Racine

Sheboygan

Washington

Waukesha

**TOTAL NUMBER OF ADMISSIONS** 4,290**PERCENT ADMISSIONS FROM:**

Private Residences 28.5%

General Hospitals 67.6

Nursing Homes 2.7

Other 1.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 4,352

**PERCENT DISCHARGES TO:**

Private Residences 91.4%

General Hospitals 2.9

Nursing Homes 1.1

Deaths 2.2

Other 2.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	3,034	48,232	15.9
Home Health Aide	515	21,190	41.1
Physical Therapy	2,080	16,007	7.7
Spch/Occ/Resp Therapy	627	4,691	7.5
Medical Social Service	141	179	1.3
Private Duty Nursing	97	9,569	98.6
Personal Care/PC RN Supv.	87	9,190	105.6
Other Home Health Care	17	23	1.4
Homemkr & Other Non HH	161	5,295	32.9
TOTAL	XXXXXXX	114,376	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.9%	Medicare 63.0%
4 to 34 5.2	Medicaid 5.7
35 to 54 14.4	Other Federal 0.0
55 to 64 13.9	State Funds 0.9
65 to 74 18.0	Private Insurance 26.2
75 to 84 27.0	Self Pay 1.9
85 & over 17.5	Other 2.3
	TOTAL PATIENTS 4,688

Males 39.4% Females 60.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.5%	Digestive Disorders 5.0%
Cancer 9.2	Genitourinary Sys. 2.5
Diabetes 4.1	Preg. & Childbirth 0.4
Diseases of Blood 1.0	Arthropathies 11.6
Dementia/Alzheimers 0.4	Osteopathies 1.5
Psychoses/Neuroses 1.3	Perinatal Period 2.9
Central Nervous Sys. 2.2	Ill-Defined Cond. 12.8
Paralysis/CP 0.7	Fractures 3.2
Cardiovascular 10.8	Wounds, Burns 1.7
Stroke 1.7	Compl. of Surgery 4.4
Respiratory 4.8	Other Conditions 16.4

**REVENUE**

Billings	\$ 13,405,720
Disallowances	1,473,886
Collections	11,931,834
Other	41,230
Total	11,973,064

**EXPENSES**

Total	\$ 11,351,647
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	5.0
Registered Nurses	51.3
Licensed Practical Nurses	8.2
Home Health Aides	43.7
Physical Therapists	13.3
Occupational Therapists	3.8
Speech Pathologists	0.2
Respiratory Therapists	0.0
Medical Social Workers	8.2
Other Therapeutic Staff	0.0
Personal Care Workers	5.5
Homemakers	13.7
Other Staff	126.0
TOTAL FTES	279.9

**Regal Home Health Services, Inc.**

5600 Brown Deer Road, Suite 117

Brown Deer WI 53223

Milwaukee County

**COUNTIES SERVED**

Milwaukee

(414) 355-7801

License Number: 1032

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 25

**TOTAL NUMBER OF ADMISSIONS** 25**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	100.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 4

**PERCENT DISCHARGES TO:**

Private Residences	0.0%
General Hospitals	50.0
Nursing Homes	25.0
Deaths	0.0
Other	25.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	25	884	35.4
Home Health Aide	4	56	14.0
Physical Therapy	8	119	14.9
Spch/Occ/Resp Therapy	7	54	7.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,113	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 80.0%
4 to 34 12.0	Medicaid 16.0
35 to 54 16.0	Other Federal 0.0
55 to 64 20.0	State Funds 0.0
65 to 74 8.0	Private Insurance 0.0
75 to 84 32.0	Self Pay 4.0
85 & over 12.0	Other 0.0
	TOTAL PATIENTS 25

Males 20.0% Females 80.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 4.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 20.0	Preg. & Childbirth 0.0
Diseases of Blood 4.0	Arthropathies 12.0
Dementia/Alzheimers 4.0	Osteopathies 0.0
Psychoses/Neuroses 16.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 12.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 24.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 4.0

**REVENUE**

Billings \$	137,751
Disallowances	711
Collections	137,040
Other	0
Total	137,040

**EXPENSES**

Total \$	117,924
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	2.9
Licensed Practical Nurses	0.1
Home Health Aides	0.1
Physical Therapists	0.1
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	5.3

**Aedon Homecare, LLC**

4861 South 27th Street  
Greenfield WI 53221

Milwaukee County

(414) 282-4041

License Number: 1031

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 270

**COUNTIES SERVED**

Dodge  
Kenosha  
Milwaukee  
Ozaukee  
Racine  
Waukesha

**TOTAL NUMBER OF ADMISSIONS** 297

**PERCENT ADMISSIONS FROM:**

Private Residences	2.0%
General Hospitals	8.4
Nursing Homes	84.8
Other	4.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 254

**PERCENT DISCHARGES TO:**

Private Residences	79.1%
General Hospitals	9.1
Nursing Homes	4.7
Deaths	0.8
Other	6.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	187	1,914	10.2
Home Health Aide	79	483	6.1
Physical Therapy	204	1,164	5.7
Spch/Occ/Resp Therapy	108	547	5.1
Medical Social Service	46	78	1.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,186	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 95.9%
4 to 34 0.4	Medicaid 3.7
35 to 54 6.3	Other Federal 0.0
55 to 64 5.6	State Funds 0.0
65 to 74 19.3	Private Insurance 0.4
75 to 84 45.2	Self Pay 0.0
85 & over 23.3	Other 0.0
	TOTAL PATIENTS 270

Males 35.6% Females 64.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.4%	Digestive Disorders 1.1%
Cancer 4.4	Genitourinary Sys. 2.6
Diabetes 19.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.0
Dementia/Alzheimers 0.0	Osteopathies 0.7
Psychoses/Neuroses 0.0	Perinatal Period 0.7
Central Nervous Sys. 3.0	Ill-Defined Cond. 32.2
Paralysis/CP 0.7	Fractures 4.1
Cardiovascular 8.9	Wounds, Burns 3.0
Stroke 3.0	Compl. of Surgery 0.7
Respiratory 3.3	Other Conditions 8.9

**REVENUE**

Billings \$	699,932
Disallowances	128,508
Collections	571,424
Other	0
Total	571,424

**EXPENSES**

Total \$	444,941
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	3.0
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	2.0
Occupational Therapists	1.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.5
Other Therapeutic Staff	0.8
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTES	13.8

**Affiliated Home Health Care, Inc.**

816 West National Avenue

Milwaukee WI 53204

Milwaukee County

**COUNTIES SERVED**

Milwaukee

(414) 389-0371

License Number: 326

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 253

**TOTAL NUMBER OF ADMISSIONS** 137**PERCENT ADMISSIONS FROM:**

Private Residences	86.9%
General Hospitals	5.8
Nursing Homes	0.0
Other	7.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 85

**PERCENT DISCHARGES TO:**

Private Residences	64.7%
General Hospitals	18.8
Nursing Homes	1.2
Deaths	8.2
Other	7.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	252	12,120	48.1
Home Health Aide	8	2,443	305.4
Physical Therapy	16	328	20.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	261	26,552	101.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	9	905	100.6
TOTAL	XXXXXXX	42,348	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 6.4%
4 to 34 5.5	Medicaid 73.2
35 to 54 41.1	Other Federal 0.0
55 to 64 24.1	State Funds 19.2
65 to 74 14.6	Private Insurance 0.4
75 to 84 12.3	Self Pay 0.8
85 & over 2.4	Other 0.0
	TOTAL PATIENTS 265

Males 33.2% Females 66.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.4%		
Cancer 0.8	Genitourinary Sys. 3.6		
Diabetes 19.0	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 8.3		
Dementia/Alzheimers 1.6	Osteopathies 2.0		
Psychoses/Neuroses 22.9	Perinatal Period 0.0		
Central Nervous Sys. 5.5	Ill-Defined Cond. 1.2		
Paralysis/CP 5.9	Fractures 2.8		
Cardiovascular 4.3	Wounds, Burns 2.4		
Stroke 5.1	Compl. of Surgery 0.0		
Respiratory 4.3	Other Conditions 9.9		

**REVENUE**

Billings \$	1,565,325
Disallowances	191,918
Collections	1,373,407
Other	0
Total	1,373,407

**EXPENSES**

Total \$	1,497,244
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**STAFFING****FTES**

Administrators	1.6
Reg. Nurse Supervisors	0.3
Registered Nurses	2.0
Licensed Practical Nurses	0.0
Home Health Aides	2.7
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	31.3
Homemakers	0.8
Other Staff	4.0
TOTAL FTES	42.9

**Barry Healthcare Services, Inc.**

312 East Wisconsin Avenue, Suite 200  
 Milwaukee WI 53202 Milwaukee County

**COUNTIES SERVED**

Kenosha  
 Milwaukee

(414) 272-9990

License Number: 123  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 216

**TOTAL NUMBER OF ADMISSIONS** 182

**PERCENT ADMISSIONS FROM:**

Private Residences	47.8%
General Hospitals	25.3
Nursing Homes	2.7
Other	24.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 192

**PERCENT DISCHARGES TO:**

Private Residences	40.1%
General Hospitals	38.0
Nursing Homes	7.8
Deaths	1.0
Other	13.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	216	7,276	33.7
Home Health Aide	23	1,990	86.5
Physical Therapy	2	29	14.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	3	696	232.0
Personal Care/PC RN Supv.	280	50,674	181.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	32	1,377	43.0
TOTAL	XXXXXXX	62,042	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.3%	Medicare 3.8%
4 to 34 16.2	Medicaid 56.4
35 to 54 19.4	Other Federal 0.0
55 to 64 15.3	State Funds 35.6
65 to 74 21.3	Private Insurance 3.4
75 to 84 13.4	Self Pay 0.8
85 & over 12.0	Other 0.0
	TOTAL PATIENTS 236

Males 38.9% Females 61.1 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.5%	Digestive Disorders 0.5%
Cancer 1.4	Genitourinary Sys. 3.2
Diabetes 3.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 29.6
Dementia/Alzheimers 1.9	Osteopathies 1.4
Psychoses/Neuroses 1.4	Perinatal Period 0.0
Central Nervous Sys. 6.0	Ill-Defined Cond. 1.4
Paralysis/CP 14.4	Fractures 0.5
Cardiovascular 1.9	Wounds, Burns 1.4
Stroke 9.3	Compl. of Surgery 0.5
Respiratory 7.4	Other Conditions 13.9

**REVENUE**

Billings \$	3,963,155
Disallowances	1,084,816
Collections	2,878,339
Other	276,272
Total	3,154,611

**EXPENSES**

Total \$	2,797,140
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	8.0
Licensed Practical Nurses	4.6
Home Health Aides	17.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	67.0
Homemakers	1.5
Other Staff	8.0
TOTAL FTES	108.4

**Covenant Home Health and Hospice, Inc.**

9688 West Appleton Avenue

Milwaukee WI 53225

Milwaukee County

(414) 535-6900

License Number: 179

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 7,079

**COUNTIES SERVED**

Kenosha

Milwaukee

Ozaukee

Racine

Washington

Waukesha

**TOTAL NUMBER OF ADMISSIONS** 6,356**PERCENT ADMISSIONS FROM:**

Private Residences 25.5%

General Hospitals 69.2

Nursing Homes 5.0

Other 0.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 6,334

**PERCENT DISCHARGES TO:**

Private Residences 85.4%

General Hospitals 6.4

Nursing Homes 2.1

Deaths 1.4

Other 4.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	5,991	58,959	9.8
Home Health Aide	3,615	21,587	6.0
Physical Therapy	2,732	14,490	5.3
Spch/Occ/Resp Therapy	1,175	5,773	4.9
Medical Social Service	127	255	2.0
Private Duty Nursing	8	2,982	372.8
Personal Care/PC RN Supv.	168	2,938	17.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	36	402	11.2
TOTAL	XXXXXXX	107,386	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 20.1%	Medicare 50.7%
4 to 34 4.3	Medicaid 11.5
35 to 54 13.6	Other Federal 0.0
55 to 64 10.6	State Funds 0.0
65 to 74 15.0	Private Insurance 36.4
75 to 84 21.7	Self Pay 1.4
85 & over 14.8	Other 0.0
	TOTAL PATIENTS 7,079

Males 43.2% Females 56.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.0%	Digestive Disorders 3.2%
Cancer 8.7	Genitourinary Sys. 2.1
Diabetes 3.4	Preg. & Childbirth 0.3
Diseases of Blood 0.8	Arthropathies 9.0
Dementia/Alzheimers 0.1	Osteopathies 0.8
Psychoses/Neuroses 0.7	Perinatal Period 17.4
Central Nervous Sys. 1.3	Ill-Defined Cond. 6.6
Paralysis/CP 0.1	Fractures 4.8
Cardiovascular 15.0	Wounds, Burns 2.1
Stroke 2.6	Compl. of Surgery 6.6
Respiratory 5.1	Other Conditions 8.3

REVENUE	
Billings \$	15,277,119
Disallowances	4,019,367
Collections	11,257,752
Other	41,486
Total	11,299,238

EXPENSES	
Total	\$ 10,277,244

STAFFING	FTES
Administrators	1.0
Reg. Nurse Supervisors	8.0
Registered Nurses	81.7
Licensed Practical Nurses	9.9
Home Health Aides	25.8
Physical Therapists	13.8
Occupational Therapists	3.2
Speech Pathologists	2.1
Respiratory Therapists	0.0
Medical Social Workers	1.6
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.6
Other Staff	21.0
TOTAL FTES	168.6

**Laabs Home Health Care, Inc.**

619 North 35th  
Milwaukee WI 53208

Milwaukee County

**COUNTIES SERVED**

Milwaukee

(414) 342-7442

License Number: 147

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 59

**TOTAL NUMBER OF ADMISSIONS** 26

**PERCENT ADMISSIONS FROM:**

Private Residences	61.5%
General Hospitals	11.5
Nursing Homes	3.8
Other	23.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 26

**PERCENT DISCHARGES TO:**

Private Residences	65.4%
General Hospitals	15.4
Nursing Homes	7.7
Deaths	3.8
Other	7.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	58	7,433	128.2
Home Health Aide	10	3,931	393.1
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	11	1,046	95.1
Personal Care/PC RN Supv.	26	3,229	124.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	15,639	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.1%	Medicare 16.5%
4 to 34 16.9	Medicaid 67.1
35 to 54 30.5	Other Federal 0.0
55 to 64 13.6	State Funds 13.9
65 to 74 13.6	Private Insurance 0.0
75 to 84 13.6	Self Pay 2.5
85 & over 6.8	Other 0.0
	TOTAL PATIENTS 79

Males 50.8% Females 49.2 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 1.7	Genitourinary Sys. 1.7		
Diabetes 25.4	Preg. & Childbirth 0.0		
Diseases of Blood 1.7	Arthropathies 10.2		
Dementia/Alzheimers 0.0	Osteopathies 0.0		
Psychoses/Neuroses 8.5	Perinatal Period 6.8		
Central Nervous Sys. 5.1	Ill-Defined Cond. 3.4		
Paralysis/CP 5.1	Fractures 1.7		
Cardiovascular 0.0	Wounds, Burns 11.9		
Stroke 5.1	Compl. of Surgery 1.7		
Respiratory 0.0	Other Conditions 10.2		

**REVENUE**

Billings \$	1,229,338
Disallowances	470,738
Collections	758,600
Other	0
Total	758,600

**EXPENSES**

Total \$	1,111,689
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.6
Licensed Practical Nurses	2.8
Home Health Aides	5.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	19.7



**Maxim Healthcare Services, Inc.**

3077 North Mayfair Road, Suite 200  
Milwaukee WI 53222 Milwaukee County

(414) 475-9330

**COUNTIES SERVED**

Dodge  
Milwaukee  
Waukesha

License Number: 1029  
Ownership of Agency: Proprietary Corporation  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 17

**TOTAL NUMBER OF ADMISSIONS** 18

**PERCENT ADMISSIONS FROM:**

Private Residences	88.9%
General Hospitals	0.0
Nursing Homes	0.0
Other	11.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	75.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	25.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	13	14	1.1
Home Health Aide	4	593	148.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	1	52	52.0
TOTAL	XXXXXXX	659	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 17.6%	Medicare 0.0%
4 to 34 0.0	Medicaid 0.0
35 to 54 5.9	Other Federal 0.0
55 to 64 29.4	State Funds 0.0
65 to 74 5.9	Private Insurance 23.5
75 to 84 23.5	Self Pay 23.5
85 & over 17.6	Other 52.9
	TOTAL PATIENTS 17

Males 70.6% Females 29.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 17.6	Arthropathies 0.0
Dementia/Alzheimers 5.9	Osteopathies 0.0
Psychoses/Neuroses 11.8	Perinatal Period 0.0
Central Nervous Sys. 11.8	Ill-Defined Cond. 0.0
Paralysis/CP 5.9	Fractures 0.0
Cardiovascular 17.6	Wounds, Burns 5.9
Stroke 5.9	Compl. of Surgery 0.0
Respiratory 17.6	Other Conditions 0.0

**REVENUE**

Billings \$	0
Disallowances	0
Collections	0
Other	0
Total	0

**EXPENSES**

Total \$	119,454
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.3
Registered Nurses	0.3
Licensed Practical Nurses	0.0
Home Health Aides	1.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.4
Other Staff	2.0
TOTAL FTES	4.9

**Metro Home Health Services, Inc.**

6014 West Congress Street

Milwaukee WI 53218

Milwaukee County

**COUNTIES SERVED**

Milwaukee

(414) 464-4490

License Number: 23

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 236

**TOTAL NUMBER OF ADMISSIONS** 65**PERCENT ADMISSIONS FROM:**

Private Residences	10.8%
General Hospitals	72.3
Nursing Homes	0.0
Other	16.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 94

**PERCENT DISCHARGES TO:**

Private Residences	50.0%
General Hospitals	7.4
Nursing Homes	1.1
Deaths	14.9
Other	26.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	181	2,086	11.5
Home Health Aide	14	1,235	88.2
Physical Therapy	15	214	14.3
Spch/Occ/Resp Therapy	3	17	5.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	442	61,194	138.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	5	498	99.6
TOTAL	XXXXXXX	65,244	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 10.3%
4 to 34 8.5	Medicaid 53.0
35 to 54 25.8	Other Federal 0.0
55 to 64 13.6	State Funds 32.4
65 to 74 21.6	Private Insurance 3.2
75 to 84 18.2	Self Pay 0.0
85 & over 12.3	Other 1.2
	TOTAL PATIENTS 253

Males 29.2% Females 70.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 1.3%		
Cancer 4.2	Genitourinary Sys. 4.7		
Diabetes 7.6	Preg. & Childbirth 0.4		
Diseases of Blood 0.0	Arthropathies 28.0		
Dementia/Alzheimers 3.4	Osteopathies 0.4		
Psychoses/Neuroses 4.2	Perinatal Period 0.4		
Central Nervous Sys. 2.5	Ill-Defined Cond. 1.7		
Paralysis/CP 6.8	Fractures 1.7		
Cardiovascular 4.7	Wounds, Burns 1.7		
Stroke 12.7	Compl. of Surgery 0.0		
Respiratory 4.2	Other Conditions 9.3		

**REVENUE**

Billings \$	3,751,956
Disallowances	592,129
Collections	3,159,827
Other	2,914
Total	3,162,741

**EXPENSES**

Total \$	3,024,281
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.7
Licensed Practical Nurses	0.3
Home Health Aides	5.4
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	3.0
Other Therapeutic Staff	0.0
Personal Care Workers	90.6
Homemakers	1.2
Other Staff	12.2
TOTAL FTES	117.4

**Midamerica Healthcare Corporation of Wisconsin**  
 7905 West Appleton Avenue, #201  
 Milwaukee WI 53218 Milwaukee County

**COUNTIES SERVED**  
 Milwaukee  
 Waushara

(414) 578-2961

License Number: 309  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 374

**TOTAL NUMBER OF ADMISSIONS** 146

**PERCENT ADMISSIONS FROM:**

Private Residences	83.6%
General Hospitals	6.2
Nursing Homes	0.0
Other	10.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 85

**PERCENT DISCHARGES TO:**

Private Residences	64.7%
General Hospitals	7.1
Nursing Homes	0.0
Deaths	9.4
Other	18.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	216	1,583	7.3
Home Health Aide	12	415	34.6
Physical Therapy	3	21	7.0
Spch/Occ/Resp Therapy	2	2	1.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	740	203,864	275.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	9	845	93.9
TOTAL	XXXXXXX	206,730	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 2.0%
4 to 34 11.0	Medicaid 80.0
35 to 54 10.7	Other Federal 0.0
55 to 64 12.3	State Funds 18.0
65 to 74 26.2	Private Insurance 0.0
75 to 84 29.4	Self Pay 0.0
85 & over 10.4	Other 0.0
	TOTAL PATIENTS 511

Males 32.4% Females 67.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.8%	Digestive Disorders 1.9%		
Cancer 2.1	Genitourinary Sys. 2.7		
Diabetes 2.9	Preg. & Childbirth 0.0		
Diseases of Blood 0.8	Arthropathies 36.4		
Dementia/Alzheimers 1.3	Osteopathies 1.3		
Psychoses/Neuroses 5.9	Perinatal Period 0.0		
Central Nervous Sys. 2.1	Ill-Defined Cond. 6.7		
Paralysis/CP 4.5	Fractures 1.1		
Cardiovascular 6.4	Wounds, Burns 1.3		
Stroke 7.5	Compl. of Surgery 0.0		
Respiratory 4.0	Other Conditions 10.2		

**REVENUE**

Billings \$	8,035,687
Disallowances	1,940,235
Collections	6,095,452
Other	22,444
Total	6,117,896

**EXPENSES**

Total \$	5,588,034
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	7.5
Licensed Practical Nurses	0.0
Home Health Aides	7.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	150.4
Homemakers	0.7
Other Staff	8.0
TOTAL FTES	176.9

**Preferred Home Health Services, LLC**

10919 West Bluemound Road

Milwaukee WI 53226

Milwaukee County

**COUNTIES SERVED**

Milwaukee

Waukesha

(414) 774-3901

License Number: 278

Ownership of Agency: Limited Liability Partnership

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 282

**TOTAL NUMBER OF ADMISSIONS** 219**PERCENT ADMISSIONS FROM:**

Private Residences	86.3%
General Hospitals	13.2
Nursing Homes	0.5
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 159

**PERCENT DISCHARGES TO:**

Private Residences	74.2%
General Hospitals	19.5
Nursing Homes	2.5
Deaths	3.8
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	124	10,395	83.8
Home Health Aide	29	4,242	146.3
Physical Therapy	12	136	11.3
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	1	127	127.0
Personal Care/PC RN Supv.	448	34,005	75.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	3	119	39.7
TOTAL	XXXXXXX	49,024	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.4%	Medicare 6.8%
4 to 34 10.6	Medicaid 83.3
35 to 54 43.3	Other Federal 0.0
55 to 64 22.3	State Funds 8.2
65 to 74 12.1	Private Insurance 0.3
75 to 84 9.2	Self Pay 1.4
85 & over 2.1	Other 0.0
	TOTAL PATIENTS 294

Males 25.2% Females 74.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.7%		
Cancer 3.2	Genitourinary Sys. 3.9		
Diabetes 9.6	Preg. & Childbirth 0.0		
Diseases of Blood 1.4	Arthropathies 27.3		
Dementia/Alzheimers 1.1	Osteopathies 0.7		
Psychoses/Neuroses 8.9	Perinatal Period 0.0		
Central Nervous Sys. 2.5	Ill-Defined Cond. 9.6		
Paralysis/CP 3.2	Fractures 1.8		
Cardiovascular 5.7	Wounds, Burns 3.2		
Stroke 2.8	Compl. of Surgery 0.0		
Respiratory 3.5	Other Conditions 11.0		

**REVENUE**

Billings \$	3,595,200
Disallowances	1,380,939
Collections	2,214,261
Other	0
Total	2,214,261

**EXPENSES**

Total \$	1,450,814
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.2
Registered Nurses	3.8
Licensed Practical Nurses	0.8
Home Health Aides	8.6
Physical Therapists	0.3
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	43.7
Homemakers	0.1
Other Staff	3.7
TOTAL FTES	62.2

**Quality Assurance Home Health Services**

8320 West Beatrice Court

Milwaukee WI 53224

Milwaukee County

**COUNTIES SERVED**

Milwaukee

Waukesha

(414) 362-0362

License Number: 1023

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 137

**TOTAL NUMBER OF ADMISSIONS** 106**PERCENT ADMISSIONS FROM:**

Private Residences	18.9%
General Hospitals	45.3
Nursing Homes	0.0
Other	35.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 53

**PERCENT DISCHARGES TO:**

Private Residences	83.0%
General Hospitals	0.0
Nursing Homes	13.2
Deaths	3.8
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	100	1,884	18.8
Home Health Aide	17	1,194	70.2
Physical Therapy	22	249	11.3
Spch/Occ/Resp Therapy	26	309	11.9
Medical Social Service	1	1	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	96	7,580	79.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,217	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 45.3%
4 to 34 13.9	Medicaid 46.7
35 to 54 27.7	Other Federal 0.0
55 to 64 16.1	State Funds 1.5
65 to 74 10.9	Private Insurance 5.8
75 to 84 20.4	Self Pay 0.7
85 & over 10.9	Other 0.0
	TOTAL PATIENTS 137

Males 45.3% Females 54.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.7%	Digestive Disorders 0.0%
Cancer 0.7	Genitourinary Sys. 0.7
Diabetes 19.7	Preg. & Childbirth 0.0
Diseases of Blood 1.5	Arthropathies 9.5
Dementia/Alzheimers 2.9	Osteopathies 0.7
Psychoses/Neuroses 5.1	Perinatal Period 0.0
Central Nervous Sys. 3.6	Ill-Defined Cond. 7.3
Paralysis/CP 8.8	Fractures 0.7
Cardiovascular 10.2	Wounds, Burns 3.6
Stroke 3.6	Compl. of Surgery 0.0
Respiratory 3.6	Other Conditions 16.8

**REVENUE**

Billings \$	787,282
Disallowances	423,844
Collections	363,438
Other	0
Total	363,438

**EXPENSES**

Total \$	743,493
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	5.0
Licensed Practical Nurses	2.0
Home Health Aides	35.9
Physical Therapists	1.0
Occupational Therapists	1.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	36.5
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	85.4

**Visiting Nurse Association of Wisconsin**

11333 West National Avenue

Milwaukee WI 53227

Milwaukee County

(414) 327-2295

License Number: 81

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 10,252

**COUNTIES SERVED**

Brown  
Calumet  
Dodge  
Fond du Lac  
Green Lake  
Jefferson  
Kenosha  
Manitowoc  
Milwaukee  
Outagamie  
Ozaukee  
Racine  
Sheboygan  
Walworth  
Washington  
Waukesha  
Winnebago

**TOTAL NUMBER OF ADMISSIONS** 10,117**PERCENT ADMISSIONS FROM:**

Private Residences 32.4%  
General Hospitals 61.4  
Nursing Homes 2.5  
Other 3.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 10,157

**PERCENT DISCHARGES TO:**

Private Residences 79.2%  
General Hospitals 10.8  
Nursing Homes 2.6  
Deaths 1.6  
Other 5.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	8,949	111,840	12.5
Home Health Aide	1,775	40,048	22.6
Physical Therapy	4,263	34,953	8.2
Spch/Occ/Resp Therapy	1,690	10,926	6.5
Medical Social Service	1,290	3,149	2.4
Private Duty Nursing	4	548	137.0
Personal Care/PC RN Supv.	677	26,180	38.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	111	5,354	48.2
TOTAL	XXXXXXX	232,998	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.8%	Medicare 65.3%
4 to 34 6.0	Medicaid 8.7
35 to 54 13.0	Other Federal 0.0
55 to 64 11.9	State Funds 0.7
65 to 74 19.0	Private Insurance 23.0
75 to 84 28.6	Self Pay 2.2
85 & over 16.6	Other 0.0
	TOTAL PATIENTS 10,252

Males 40.6% Females 59.4 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.8%	Digestive Disorders 4.4%
Cancer 9.3	Genitourinary Sys. 2.9
Diabetes 5.2	Preg. & Childbirth 0.3
Diseases of Blood 1.3	Arthropathies 8.4
Dementia/Alzheimers 0.4	Osteopathies 6.0
Psychoses/Neuroses 1.5	Perinatal Period 1.9
Central Nervous Sys. 3.1	Ill-Defined Cond. 6.9
Paralysis/CP 0.5	Fractures 3.7
Cardiovascular 19.2	Wounds, Burns 2.3
Stroke 2.5	Compl. of Surgery 6.0
Respiratory 5.2	Other Conditions 8.3

**REVENUE**

Billings	\$ 24,842,342
Disallowances	1,013,414
Collections	23,828,928
Other	645,127
Total	24,474,055

**EXPENSES**

Total	\$ 26,262,529
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**STAFFING****FTES**

Administrators	2.0
Reg. Nurse Supervisors	20.6
Registered Nurses	79.5
Licensed Practical Nurses	7.4
Home Health Aides	61.7
Physical Therapists	27.8
Occupational Therapists	7.1
Speech Pathologists	1.5
Respiratory Therapists	0.0
Medical Social Workers	8.3
Other Therapeutic Staff	3.5
Personal Care Workers	0.0
Homemakers	5.4
Other Staff	98.7
TOTAL FTES	323.3

**"Your Nurse" Home Health Care, Inc.**

5818 West Bluemound Road, #100

Milwaukee WI 53213

Milwaukee County

**COUNTIES SERVED**

Milwaukee

Waukesha

(414) 774-9400

License Number: 312

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 31

**TOTAL NUMBER OF ADMISSIONS** 6**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	33.3
Nursing Homes	0.0
Other	66.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 7

**PERCENT DISCHARGES TO:**

Private Residences	0.0%
General Hospitals	28.6
Nursing Homes	14.3
Deaths	14.3
Other	42.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	28	4,860	173.6
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	3	1,153	384.3
Personal Care/PC RN Supv.	10	1,565	156.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,578	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 35.5	Medicaid 61.3
35 to 54 29.0	Other Federal 0.0
55 to 64 12.9	State Funds 32.3
65 to 74 3.2	Private Insurance 6.5
75 to 84 16.1	Self Pay 0.0
85 & over 3.2	Other 0.0
	TOTAL PATIENTS 31

Males 54.8% Females 45.2 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 3.2%
Cancer 0.0	Genitourinary Sys. 16.1
Diabetes 16.1	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.2
Dementia/Alzheimers 3.2	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 9.7	Ill-Defined Cond. 6.5
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 16.1
Stroke 3.2	Compl. of Surgery 3.2
Respiratory 16.1	Other Conditions 3.2

**REVENUE**

Billings \$	798,297
Disallowances	325,439
Collections	472,858
Other	14,528
Total	487,386

**EXPENSES**

Total \$	600,717
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.2
Registered Nurses	2.0
Licensed Practical Nurses	3.7
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.4
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	9.3

**Nursing Consultation and Care Management, Inc.**  
 3878 North Morris Boulevard  
 Shorewood WI 53211 Milwaukee County  
 (414) 964-8800

**COUNTIES SERVED**  
 Milwaukee  
 Ozaukee  
 Waukesha

License Number: 225  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? No  
 Title 19 (Medicaid) certified? No  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 19

**TOTAL NUMBER OF ADMISSIONS** 12

**PERCENT ADMISSIONS FROM:**

Private Residences	83.3%
General Hospitals	16.7
Nursing Homes	0.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 8

**PERCENT DISCHARGES TO:**

Private Residences	12.5%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	37.5
Other	50.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	19	228	12.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	1	991	991.0
Personal Care/PC RN Supv.	38	2,808	73.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,027	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 5.3	Medicaid 0.0
35 to 54 0.0	Other Federal 0.0
55 to 64 15.8	State Funds 0.0
65 to 74 10.5	Private Insurance 0.0
75 to 84 42.1	Self Pay 100.0
85 & over 26.3	Other 0.0
	TOTAL PATIENTS 19

Males 21.1% Females 78.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 10.5	Genitourinary Sys. 0.0		
Diabetes 10.5	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 5.3		
Dementia/Alzheimers 15.8	Osteopathies 0.0		
Psychoses/Neuroses 0.0	Perinatal Period 0.0		
Central Nervous Sys. 15.8	Ill-Defined Cond. 0.0		
Paralysis/CP 0.0	Fractures 5.3		
Cardiovascular 21.1	Wounds, Burns 0.0		
Stroke 10.5	Compl. of Surgery 5.3		
Respiratory 0.0	Other Conditions 0.0		

REVENUE		
Billings \$	648,328	
Disallowances	0	
Collections	648,328	
Other	0	
Total	648,328	

EXPENSES		
Total \$	642,206	

**STAFFING FTES**

Administrators	2.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.2
Licensed Practical Nurses	0.5
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.5
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	10.1



**Anew Home Health Care**

7425 Harwood Avenue

Wauwatosa WI 53213

Milwaukee County

**COUNTIES SERVED**

Milwaukee

(414) 475-7788

License Number: 122

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 87

**TOTAL NUMBER OF ADMISSIONS** 35**PERCENT ADMISSIONS FROM:**

Private Residences	91.4%
General Hospitals	2.9
Nursing Homes	0.0
Other	5.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 37

**PERCENT DISCHARGES TO:**

Private Residences	64.9%
General Hospitals	16.2
Nursing Homes	5.4
Deaths	0.0
Other	13.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	9	127	14.1
Home Health Aide	5	1,723	344.6
Physical Therapy	5	77	15.4
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	166	23,630	142.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	25,557	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 5.7%
4 to 34 12.6	Medicaid 94.3
35 to 54 39.1	Other Federal 0.0
55 to 64 19.5	State Funds 0.0
65 to 74 11.5	Private Insurance 0.0
75 to 84 8.0	Self Pay 0.0
85 & over 9.2	Other 0.0
	TOTAL PATIENTS 87

Males 39.1% Females 60.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 1.1	Genitourinary Sys. 1.1		
Diabetes 5.7	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 29.9		
Dementia/Alzheimers 1.1	Osteopathies 0.0		
Psychoses/Neuroses 2.3	Perinatal Period 0.0		
Central Nervous Sys. 4.6	Ill-Defined Cond. 3.4		
Paralysis/CP 12.6	Fractures 0.0		
Cardiovascular 4.6	Wounds, Burns 2.3		
Stroke 9.2	Compl. of Surgery 0.0		
Respiratory 1.1	Other Conditions 20.7		

**REVENUE**

Billings \$	1,205,639
Disallowances	4,476
Collections	1,201,163
Other	1,500
Total	1,202,663

**EXPENSES**

Total \$	1,152,218
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	2.8
Licensed Practical Nurses	0.0
Home Health Aides	1.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	44.8
Homemakers	3.8
Other Staff	6.5
TOTAL FTES	60.6

**Camillus Cares Home Health**  
 10101 West Wisconsin Avenue  
 Wauwatosa WI 53226

Milwaukee County

**COUNTIES SERVED**

Milwaukee  
 Waukesha

(414) 258-2418

License Number: 148  
 Ownership of Agency: Nonprofit Private  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 117

**TOTAL NUMBER OF ADMISSIONS** 88

**PERCENT ADMISSIONS FROM:**

Private Residences	64.8%
General Hospitals	21.6
Nursing Homes	9.1
Other	4.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 82

**PERCENT DISCHARGES TO:**

Private Residences	61.0%
General Hospitals	6.1
Nursing Homes	19.5
Deaths	11.0
Other	2.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	79	1,235	15.6
Home Health Aide	41	7,795	190.1
Physical Therapy	48	368	7.7
Spch/Occ/Resp Therapy	25	150	6.0
Medical Social Service	0	0	0.0
Private Duty Nursing	21	536	25.5
Personal Care/PC RN Supv.	30	1,051	35.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,135	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 59.6%
4 to 34 0.9	Medicaid 9.9
35 to 54 2.6	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 8.5	Private Insurance 0.7
75 to 84 31.6	Self Pay 29.8
85 & over 56.4	Other 0.0
	TOTAL PATIENTS 151

Males 21.4% Females 78.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.9%		
Cancer 6.0	Genitourinary Sys. 4.3		
Diabetes 1.7	Preg. & Childbirth 0.0		
Diseases of Blood 4.3	Arthropathies 16.2		
Dementia/Alzheimers 1.7	Osteopathies 0.0		
Psychoses/Neuroses 6.0	Perinatal Period 0.0		
Central Nervous Sys. 2.6	Ill-Defined Cond. 10.3		
Paralysis/CP 0.0	Fractures 5.1		
Cardiovascular 12.0	Wounds, Burns 5.1		
Stroke 8.5	Compl. of Surgery 0.9		
Respiratory 9.4	Other Conditions 5.1		

REVENUE	
Billings \$	1,067,822
Disallowances	278,753
Collections	789,069
Other	420
Total	789,489

EXPENSES	
Total \$	861,706

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	1.6
Licensed Practical Nurses	0.3
Home Health Aides	16.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.1
<b>TOTAL FTES</b>	<b>24.3</b>

**ANS Home Health Services, Inc.**

2711 South 84th Street

West Allis WI 53227

Milwaukee County

(414) 481-9800

License Number: 306

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 403

**COUNTIES SERVED**

Jefferson

Milwaukee

Ozaukee

Washington

Waukesha

**TOTAL NUMBER OF ADMISSIONS** 143**PERCENT ADMISSIONS FROM:**

Private Residences	69.9%
General Hospitals	26.6
Nursing Homes	3.5
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 187

**PERCENT DISCHARGES TO:**

Private Residences	58.8%
General Hospitals	26.7
Nursing Homes	3.7
Deaths	5.9
Other	4.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	62	8,528	137.5
Home Health Aide	32	15,146	473.3
Physical Therapy	12	68	5.7
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	708	72,620	102.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	14	1,237	88.4
TOTAL	XXXXXXX	97,599	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 0.0%
4 to 34 11.7	Medicaid 82.6
35 to 54 18.4	Other Federal 0.5
55 to 64 13.2	State Funds 12.4
65 to 74 21.1	Private Insurance 1.2
75 to 84 26.1	Self Pay 3.2
85 & over 9.2	Other 0.0
	TOTAL PATIENTS 403

Males 36.7% Females 63.3 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.7%	Digestive Disorders 0.2%		
Cancer 2.0	Genitourinary Sys. 1.5		
Diabetes 2.5	Preg. & Childbirth 0.0		
Diseases of Blood 0.5	Arthropathies 32.3		
Dementia/Alzheimers 2.5	Osteopathies 4.5		
Psychoses/Neuroses 0.5	Perinatal Period 0.2		
Central Nervous Sys. 3.5	Ill-Defined Cond. 6.0		
Paralysis/CP 13.9	Fractures 0.7		
Cardiovascular 3.0	Wounds, Burns 6.9		
Stroke 6.9	Compl. of Surgery 0.7		
Respiratory 3.2	Other Conditions 7.7		

**REVENUE**

Billings \$	8,954,475
Disallowances	3,131,081
Collections	5,823,394
Other	0
Total	5,823,394

**EXPENSES**

Total \$	5,875,997
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**STAFFING****FTES**

Administrators	2.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.8
Licensed Practical Nurses	0.5
Home Health Aides	35.0
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	3.0
Other Therapeutic Staff	0.0
Personal Care Workers	99.0
Homemakers	0.0
Other Staff	11.8
TOTAL FTES	160.2

**Gentiva Health Services**

10909 West Greenfield Avenue

West Allis WI 53214

Milwaukee County

(414) 257-1156

License Number: 237

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 1,035

**COUNTIES SERVED**

Columbia

Dane

Dodge

Green

Jefferson

Milwaukee

Ozaukee

Racine

Rock

Sauk

Sheboygan

Washington

Waukesha

**TOTAL NUMBER OF ADMISSIONS** 912**PERCENT ADMISSIONS FROM:**

Private Residences 0.0%

General Hospitals 4.7

Nursing Homes 1.4

Other 93.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 875

**PERCENT DISCHARGES TO:**

Private Residences 86.7%

General Hospitals 2.6

Nursing Homes 1.3

Deaths 1.4

Other 8.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	858	5,010	5.8
Home Health Aide	43	3,993	92.9
Physical Therapy	340	2,091	6.2
Spch/Occ/Resp Therapy	96	621	6.5
Medical Social Service	11	12	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	8	2,224	278.0
Other Home Health Care	270	946	3.5
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,897	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 22.7%	Medicare 21.4%
4 to 34 12.1	Medicaid 9.7
35 to 54 15.6	Other Federal 0.0
55 to 64 10.9	State Funds 0.0
65 to 74 10.5	Private Insurance 62.7
75 to 84 13.9	Self Pay 6.2
85 & over 14.3	Other 0.0
	TOTAL PATIENTS 1,192

Males 42.3% Females 57.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.2%	Digestive Disorders 2.3%
Cancer 3.1	Genitourinary Sys. 2.0
Diabetes 2.0	Preg. & Childbirth 0.3
Diseases of Blood 0.4	Arthropathies 10.1
Dementia/Alzheimers 0.3	Osteopathies 0.0
Psychoses/Neuroses 0.6	Perinatal Period 16.4
Central Nervous Sys. 10.6	Ill-Defined Cond. 18.8
Paralysis/CP 0.0	Fractures 3.1
Cardiovascular 5.4	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 2.9
Respiratory 6.6	Other Conditions 14.8

REVENUE	
Billings \$	2,438,221
Disallowances	781,337
Collections	1,656,884
Other	0
Total	1,656,884

EXPENSES	
Total \$	1,749,839

**STAFFING FTES**

Administrators 0.9

Reg. Nurse Supervisors 1.8

Registered Nurses 3.5

Licensed Practical Nurses 0.1

Home Health Aides 15.1

Physical Therapists 0.8

Occupational Therapists 0.4

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 1.2

Homemakers 0.0

Other Staff 5.2

TOTAL FTES 29.0

**Gentiva Health Services**

10909 West Greenfield Avenue

West Allis WI 53214

Milwaukee County

(414) 257-1156

License Number: 287

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 158

**COUNTIES SERVED**

Dane

Jefferson

Kenosha

Milwaukee

Ozaukee

Racine

Rock

Washington

Waukesha

**TOTAL NUMBER OF ADMISSIONS** 69**PERCENT ADMISSIONS FROM:**

Private Residences 0.0%

General Hospitals 5.8

Nursing Homes 2.9

Other 91.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 98

**PERCENT DISCHARGES TO:**

Private Residences 48.0%

General Hospitals 9.2

Nursing Homes 6.1

Deaths 4.1

Other 32.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	31	1,543	49.8
Home Health Aide	61	3,828	62.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	10	1,414	141.4
Personal Care/PC RN Supv.	164	16,228	99.0
Other Home Health Care	80	869	10.9
Homemkr & Other Non HH	5	146	29.2
TOTAL	XXXXXXX	24,028	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.8%	Medicare 0.0%
4 to 34 15.8	Medicaid 0.0
35 to 54 15.8	Other Federal 0.0
55 to 64 13.3	State Funds 0.0
65 to 74 14.6	Private Insurance 39.3
75 to 84 17.7	Self Pay 14.7
85 & over 19.0	Other 46.1
	TOTAL PATIENTS 191

Males 43.7% Females 56.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.3%	Digestive Disorders 3.2%
Cancer 1.9	Genitourinary Sys. 1.3
Diabetes 3.2	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 13.9
Dementia/Alzheimers 3.2	Osteopathies 0.0
Psychoses/Neuroses 3.2	Perinatal Period 1.3
Central Nervous Sys. 22.2	Ill-Defined Cond. 8.2
Paralysis/CP 0.0	Fractures 5.1
Cardiovascular 18.4	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.6
Respiratory 2.5	Other Conditions 10.8

**REVENUE**

Billings \$	379,106
Disallowances	61,298
Collections	317,808
Other	0
Total	317,808

**EXPENSES**

Total \$	404,841
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.2
Registered Nurses	0.4
Licensed Practical Nurses	0.0
Home Health Aides	1.7
Physical Therapists	0.1
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	0.6
TOTAL FTES	3.3

**Professional Home Care Service**

8410 West Cleveland Avenue

West Allis WI 53227

Milwaukee County

**COUNTIES SERVED**

Milwaukee

Racine

Waukesha

(414) 541-6010

License Number: 279

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 131

**TOTAL NUMBER OF ADMISSIONS** 72**PERCENT ADMISSIONS FROM:**

Private Residences	87.5%
General Hospitals	6.9
Nursing Homes	0.0
Other	5.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 87

**PERCENT DISCHARGES TO:**

Private Residences	72.4%
General Hospitals	9.2
Nursing Homes	11.5
Deaths	1.1
Other	5.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	59	1,529	25.9
Home Health Aide	40	1,890	47.3
Physical Therapy	8	134	16.8
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	198	10,044	50.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,597	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 5.5%
4 to 34 15.3	Medicaid 16.6
35 to 54 11.5	Other Federal 0.0
55 to 64 15.3	State Funds 35.9
65 to 74 19.1	Private Insurance 0.0
75 to 84 29.0	Self Pay 24.1
85 & over 9.9	Other 17.9
	TOTAL PATIENTS 145

Males 28.2% Females 71.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.5%	Digestive Disorders 3.1%		
Cancer 5.3	Genitourinary Sys. 0.0		
Diabetes 4.6	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 3.8		
Dementia/Alzheimers 8.4	Osteopathies 0.0		
Psychoses/Neuroses 8.4	Perinatal Period 0.0		
Central Nervous Sys. 4.6	Ill-Defined Cond. 1.5		
Paralysis/CP 13.7	Fractures 3.8		
Cardiovascular 3.1	Wounds, Burns 12.2		
Stroke 9.2	Compl. of Surgery 3.1		
Respiratory 3.8	Other Conditions 9.9		

REVENUE		
Billings \$	651,389	
Disallowances	0	
Collections	651,389	
Other	0	
Total	651,389	

EXPENSES		
Total \$	678,053	

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.7
Licensed Practical Nurses	0.0
Home Health Aides	1.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	10.1
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	16.1

**Monroe County Health Department**

14301 County Highway B, A 18

Sparta WI 54656

Monroe County

**COUNTIES SERVED**

Monroe

(608) 269-8666

License Number: 83

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 111

**TOTAL NUMBER OF ADMISSIONS** 54**PERCENT ADMISSIONS FROM:**

Private Residences	3.7%
General Hospitals	27.8
Nursing Homes	16.7
Other	51.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 60

**PERCENT DISCHARGES TO:**

Private Residences	41.7%
General Hospitals	21.7
Nursing Homes	26.7
Deaths	5.0
Other	5.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	111	2,361	21.3
Home Health Aide	59	1,445	24.5
Physical Therapy	1	2	2.0
Spch/Occ/Resp Therapy	2	49	24.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	16	455	28.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,312	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 52.7%
4 to 34 0.0	Medicaid 13.0
35 to 54 0.9	Other Federal 0.0
55 to 64 8.1	State Funds 4.1
65 to 74 17.1	Private Insurance 5.5
75 to 84 32.4	Self Pay 11.0
85 & over 41.4	Other 13.7
	TOTAL PATIENTS 146

Males 64.0% Females 36.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 3.6%		
Cancer 5.4	Genitourinary Sys. 8.1		
Diabetes 10.8	Preg. & Childbirth 0.0		
Diseases of Blood 0.9	Arthropathies 5.4		
Dementia/Alzheimers 0.9	Osteopathies 2.7		
Psychoses/Neuroses 2.7	Perinatal Period 0.0		
Central Nervous Sys. 0.9	Ill-Defined Cond. 1.8		
Paralysis/CP 0.0	Fractures 6.3		
Cardiovascular 26.1	Wounds, Burns 5.4		
Stroke 2.7	Compl. of Surgery 0.0		
Respiratory 10.8	Other Conditions 5.4		

**REVENUE**

Billings \$	246,630
Disallowances	47,600
Collections	199,030
Other	0
Total	199,030

**EXPENSES**

Total \$	349,719
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.2
Licensed Practical Nurses	0.0
Home Health Aides	1.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	1.3
TOTAL FTES	7.3

**The Woodlands Home Health**

451 Mill Street  
Suring WI 54174

Oconto County

**COUNTIES SERVED**

Marinette  
Oconto

(920) 842-4132

License Number: 1017

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 52

**TOTAL NUMBER OF ADMISSIONS** 41

**PERCENT ADMISSIONS FROM:**

Private Residences	12.2%
General Hospitals	73.2
Nursing Homes	14.6
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 47

**PERCENT DISCHARGES TO:**

Private Residences	70.2%
General Hospitals	8.5
Nursing Homes	10.6
Deaths	2.1
Other	8.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	50	804	16.1
Home Health Aide	27	456	16.9
Physical Therapy	16	213	13.3
Spch/Occ/Resp Therapy	5	57	11.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,530	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 94.2%
4 to 34 1.9	Medicaid 5.8
35 to 54 3.8	Other Federal 0.0
55 to 64 11.5	State Funds 0.0
65 to 74 21.2	Private Insurance 0.0
75 to 84 34.6	Self Pay 0.0
85 & over 26.9	Other 0.0
	TOTAL PATIENTS 52

Males 57.7% Females 42.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 3.8%
Cancer 5.8	Genitourinary Sys. 9.6
Diabetes 1.9	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 15.4
Dementia/Alzheimers 0.0	Osteopathies 1.9
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 3.8	Ill-Defined Cond. 3.8
Paralysis/CP 0.0	Fractures 3.8
Cardiovascular 21.2	Wounds, Burns 0.0
Stroke 13.5	Compl. of Surgery 0.0
Respiratory 3.8	Other Conditions 9.6

**REVENUE**

Billings \$	185,468
Disallowances	42,072
Collections	143,396
Other	0
Total	143,396

**EXPENSES**

Total \$	141,783
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	1.0
Physical Therapists	0.0
Occupational Therapists	0.5
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	3.8



**Ministry Home Care Home Health - Rhinelander**

1860 North Stevens Street, PO Box 716  
Rhinelander WI 54501 Oneida County

(715) 369-6471

License Number: 253

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 860

**COUNTIES SERVED**

Forest  
Iron  
Langlade  
Lincoln  
Oneida  
Price  
Vilas

**TOTAL NUMBER OF ADMISSIONS** 888

**PERCENT ADMISSIONS FROM:**

Private Residences	32.7%
General Hospitals	57.9
Nursing Homes	6.5
Other	2.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 879

**PERCENT DISCHARGES TO:**

Private Residences	81.3%
General Hospitals	2.8
Nursing Homes	4.7
Deaths	2.8
Other	8.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	671	7,092	10.6
Home Health Aide	232	5,640	24.3
Physical Therapy	462	4,076	8.8
Spch/Occ/Resp Therapy	192	1,163	6.1
Medical Social Service	101	128	1.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	52	1,785	34.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	26	910	35.0
TOTAL	XXXXXXX	20,794	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.2%	Medicare 75.2%
4 to 34 2.9	Medicaid 10.8
35 to 54 9.1	Other Federal 0.0
55 to 64 8.8	State Funds 0.0
65 to 74 20.2	Private Insurance 10.1
75 to 84 33.4	Self Pay 3.0
85 & over 25.3	Other 0.8
	TOTAL PATIENTS 1,017

Males 39.8% Females 60.2 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.5%	Digestive Disorders 3.5%
Cancer 6.3	Genitourinary Sys. 2.3
Diabetes 2.6	Preg. & Childbirth 0.5
Diseases of Blood 1.0	Arthropathies 10.8
Dementia/Alzheimers 0.9	Osteopathies 2.2
Psychoses/Neuroses 1.0	Perinatal Period 0.0
Central Nervous Sys. 1.9	Ill-Defined Cond. 8.6
Paralysis/CP 1.3	Fractures 7.7
Cardiovascular 12.8	Wounds, Burns 1.2
Stroke 3.5	Compl. of Surgery 4.2
Respiratory 5.0	Other Conditions 21.3

**REVENUE**

Billings \$	2,348,522
Disallowances	97,408
Collections	2,251,114
Other	1,087
Total	2,252,201

**EXPENSES**

Total \$	2,605,683
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	11.5
Licensed Practical Nurses	0.0
Home Health Aides	8.8
Physical Therapists	3.6
Occupational Therapists	1.4
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.9
Homemakers	0.0
Other Staff	3.8
TOTAL FTEs	32.0

**Ozaukee County Public Health Department**  
 121 West Main, Box 994  
 Port Washington WI 53074      Ozaukee County

**COUNTIES SERVED**  
 Ozaukee

(262) 284-8170

License Number: 89  
 Ownership of Agency: County  
 Title 18 (Medicare) certified? No  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 63

**TOTAL NUMBER OF ADMISSIONS** 37

**PERCENT ADMISSIONS FROM:**

Private Residences	56.8%
General Hospitals	2.7
Nursing Homes	5.4
Other	35.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 34

**PERCENT DISCHARGES TO:**

Private Residences	20.6%
General Hospitals	29.4
Nursing Homes	20.6
Deaths	8.8
Other	20.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	42	500	11.9
Home Health Aide	32	945	29.5
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	46	1,987	43.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,432	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4      0.0%	Medicare      0.0%
4 to 34      4.8	Medicaid      36.2
35 to 54      11.1	Other Federal      0.0
55 to 64      4.8	State Funds      0.0
65 to 74      11.1	Private Insurance      7.2
75 to 84      39.7	Self Pay      56.5
85 & over      28.6	Other      0.0
	TOTAL PATIENTS      69

Males 42.9%      Females 57.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders	0.0%
Cancer	0.0
Diabetes	7.9
Diseases of Blood	0.0
Dementia/Alzheimers	17.5
Psychoses/Neuroses	0.0
Central Nervous Sys.	0.0
Paralysis/CP	4.8
Cardiovascular	9.5
Stroke	9.5
Respiratory	9.5

Digestive Disorders	0.0%
Genitourinary Sys.	0.0
Preg. & Childbirth	0.0
Arthropathies	15.9
Osteopathies	0.0
Perinatal Period	0.0
Ill-Defined Cond.	0.0
Fractures	0.0
Wounds, Burns	1.6
Compl. of Surgery	0.0
Other Conditions	23.8

**REVENUE**

Billings \$	109,394
Disallowances	25,551
Collections	83,843
Other	0
Total	83,843

**EXPENSES**

Total \$	297,599
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.2
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTES	6.7

**Pepin County Nursing Service**

740 7th Avenue West  
Durand WI 54736

Pepin County

**COUNTIES SERVED**

Pepin

(715) 672-5961

License Number: 90  
Ownership of Agency: County  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 110

**TOTAL NUMBER OF ADMISSIONS** 90

**PERCENT ADMISSIONS FROM:**

Private Residences	50.0%
General Hospitals	21.1
Nursing Homes	14.4
Other	14.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 78

**PERCENT DISCHARGES TO:**

Private Residences	43.6%
General Hospitals	20.5
Nursing Homes	24.4
Deaths	0.0
Other	11.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	91	613	6.7
Home Health Aide	14	238	17.0
Physical Therapy	2	5	2.5
Spch/Occ/Resp Therapy	2	4	2.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	109	5,121	47.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	70	3,545	50.6
TOTAL	XXXXXXX	9,526	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 12.1%
4 to 34 2.7	Medicaid 35.6
35 to 54 8.2	Other Federal 0.0
55 to 64 8.2	State Funds 0.0
65 to 74 18.2	Private Insurance 2.0
75 to 84 34.5	Self Pay 10.1
85 & over 27.3	Other 40.3
	TOTAL PATIENTS 149

Males 30.9% Females 69.1 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.9%	Digestive Disorders 2.7%		
Cancer 7.3	Genitourinary Sys. 3.6		
Diabetes 6.4	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 19.1		
Dementia/Alzheimers 0.0	Osteopathies 3.6		
Psychoses/Neuroses 9.1	Perinatal Period 0.0		
Central Nervous Sys. 3.6	Ill-Defined Cond. 1.8		
Paralysis/CP 1.8	Fractures 4.5		
Cardiovascular 11.8	Wounds, Burns 1.8		
Stroke 9.1	Compl. of Surgery 0.9		
Respiratory 4.5	Other Conditions 7.3		

**REVENUE**

Billings \$	345,824
Disallowances	50,719
Collections	295,105
Other	0
Total	295,105

**EXPENSES**

Total \$	392,517
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.2
Licensed Practical Nurses	0.0
Home Health Aides	0.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	6.1
Homemakers	3.5
Other Staff	1.3
TOTAL FTEs	15.0

**Pierce County Home Care**

412 West Kinne Street, Box 238  
Ellsworth WI 54011

Pierce County

**COUNTIES SERVED**

Pierce

(715) 273-6756

License Number: 91

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 91

**TOTAL NUMBER OF ADMISSIONS** 58

**PERCENT ADMISSIONS FROM:**

Private Residences	55.2%
General Hospitals	36.2
Nursing Homes	6.9
Other	1.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 72

**PERCENT DISCHARGES TO:**

Private Residences	59.7%
General Hospitals	9.7
Nursing Homes	23.6
Deaths	4.2
Other	2.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	86	991	11.5
Home Health Aide	39	995	25.5
Physical Therapy	10	27	2.7
Spch/Occ/Resp Therapy	2	12	6.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	39	1,720	44.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,745	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 41.8%
4 to 34 0.0	Medicaid 26.4
35 to 54 9.9	Other Federal 0.0
55 to 64 8.8	State Funds 0.0
65 to 74 6.6	Private Insurance 7.3
75 to 84 49.5	Self Pay 13.6
85 & over 25.3	Other 10.9
	TOTAL PATIENTS 110

Males 35.2% Females 64.8 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.1%	Digestive Disorders 1.1%		
Cancer 7.7	Genitourinary Sys. 2.2		
Diabetes 8.8	Preg. & Childbirth 0.0		
Diseases of Blood 3.3	Arthropathies 8.8		
Dementia/Alzheimers 1.1	Osteopathies 0.0		
Psychoses/Neuroses 2.2	Perinatal Period 0.0		
Central Nervous Sys. 3.3	Ill-Defined Cond. 7.7		
Paralysis/CP 2.2	Fractures 7.7		
Cardiovascular 18.7	Wounds, Burns 5.5		
Stroke 4.4	Compl. of Surgery 1.1		
Respiratory 8.8	Other Conditions 4.4		

**REVENUE**

Billings \$	259,356
Disallowances	107,522
Collections	151,834
Other	0
Total	151,834

**EXPENSES**

Total \$	345,860
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.2
Licensed Practical Nurses	0.5
Home Health Aides	0.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.6
Homemakers	0.0
Other Staff	1.8
TOTAL FTES	8.7

**Spring Valley Home Health Services**

W500 - State Road 29

Spring Valley WI 54767

Pierce County

**COUNTIES SERVED**

Dunn

Pierce

St. Croix

(715) 778-5545

License Number: 349

Ownership of Agency: City

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 132

**TOTAL NUMBER OF ADMISSIONS** 38**PERCENT ADMISSIONS FROM:**

Private Residences	68.4%
General Hospitals	5.3
Nursing Homes	23.7
Other	2.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 43

**PERCENT DISCHARGES TO:**

Private Residences	20.9%
General Hospitals	4.7
Nursing Homes	58.1
Deaths	14.0
Other	2.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	8	123	15.4
Home Health Aide	2	590	295.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	137	13,010	95.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	91	6,285	69.1
TOTAL	XXXXXXX	20,008	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 0.0%
4 to 34 18.2	Medicaid 28.6
35 to 54 6.8	Other Federal 55.8
55 to 64 10.6	State Funds 0.0
65 to 74 10.6	Private Insurance 1.3
75 to 84 31.1	Self Pay 13.0
85 & over 22.0	Other 1.3
	TOTAL PATIENTS 154

Males 34.8% Females 65.2 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 1.5	Genitourinary Sys. 0.0		
Diabetes 4.5	Preg. & Childbirth 0.0		
Diseases of Blood 0.8	Arthropathies 16.7		
Dementia/Alzheimers 7.6	Osteopathies 3.0		
Psychoses/Neuroses 3.8	Perinatal Period 3.0		
Central Nervous Sys. 6.8	Ill-Defined Cond. 1.5		
Paralysis/CP 6.8	Fractures 2.3		
Cardiovascular 8.3	Wounds, Burns 3.8		
Stroke 11.4	Compl. of Surgery 2.3		
Respiratory 7.6	Other Conditions 8.3		

**REVENUE**

Billings \$	1,365,172
Disallowances	251,162
Collections	1,114,010
Other	0
Total	1,114,010

**EXPENSES**

Total \$	981,972
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	0.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	22.9
Homemakers	7.9
Other Staff	2.1
TOTAL FTES	35.4

**Polk County Home Care Program**

100 Polk County Plaza, Suite 180

Balsam Lake WI 54810

Polk County

**COUNTIES SERVED**

Polk

(715) 485-8530

License Number: 92

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 375

**TOTAL NUMBER OF ADMISSIONS** 294**PERCENT ADMISSIONS FROM:**

Private Residences	25.9%
General Hospitals	53.1
Nursing Homes	20.4
Other	0.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 275

**PERCENT DISCHARGES TO:**

Private Residences	64.7%
General Hospitals	6.9
Nursing Homes	22.9
Deaths	3.6
Other	1.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	258	3,052	11.8
Home Health Aide	93	2,368	25.5
Physical Therapy	82	911	11.1
Spch/Occ/Resp Therapy	18	41	2.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	218	5,245	24.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,617	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 49.6%
4 to 34 2.4	Medicaid 19.6
35 to 54 6.9	Other Federal 0.0
55 to 64 10.1	State Funds 0.5
65 to 74 17.1	Private Insurance 12.3
75 to 84 36.5	Self Pay 13.1
85 & over 26.4	Other 5.0
	TOTAL PATIENTS 383

Males 34.4% Females 65.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.1%	Digestive Disorders 2.9%		
Cancer 6.4	Genitourinary Sys. 0.8		
Diabetes 5.9	Preg. & Childbirth 0.0		
Diseases of Blood 1.9	Arthropathies 13.1		
Dementia/Alzheimers 0.8	Osteopathies 2.9		
Psychoses/Neuroses 0.5	Perinatal Period 0.3		
Central Nervous Sys. 2.1	Ill-Defined Cond. 4.5		
Paralysis/CP 1.3	Fractures 3.2		
Cardiovascular 26.4	Wounds, Burns 1.6		
Stroke 3.5	Compl. of Surgery 8.3		
Respiratory 4.8	Other Conditions 7.7		

**REVENUE**

Billings \$	1,077,259
Disallowances	255,914
Collections	821,345
Other	7,803
Total	829,148

**EXPENSES**

Total \$	1,329,316
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.8
Licensed Practical Nurses	2.2
Home Health Aides	3.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.8
Homemakers	0.0
Other Staff	4.4
TOTAL FTES	24.3

**Community Health Resources**

1133 South 4th Avenue, Box 110  
Park Falls WI 54552

Price County

(715) 762-4600

License Number: 27

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 113

**COUNTIES SERVED**

Ashland  
Bayfield  
Iron  
Price  
Sawyer  
Vilas

**TOTAL NUMBER OF ADMISSIONS** 82

**PERCENT ADMISSIONS FROM:**

Private Residences	30.5%
General Hospitals	52.4
Nursing Homes	13.4
Other	3.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 82

**PERCENT DISCHARGES TO:**

Private Residences	39.0%
General Hospitals	45.1
Nursing Homes	3.7
Deaths	3.7
Other	8.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	91	2,581	28.4
Home Health Aide	33	4,707	142.6
Physical Therapy	18	126	7.0
Spch/Occ/Resp Therapy	7	27	3.9
Medical Social Service	0	0	0.0
Private Duty Nursing	1	218	218.0
Personal Care/PC RN Supv.	77	11,334	147.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	18,993	XXXXX

**AGE AND SEX OF PATIENTS**

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 30.3%
4 to 34 11.5	Medicaid 55.5
35 to 54 14.2	Other Federal 0.0
55 to 64 13.3	State Funds 0.0
65 to 74 11.5	Private Insurance 6.7
75 to 84 23.0	Self Pay 7.6
85 & over 26.5	Other 0.0
	TOTAL PATIENTS 119

Males 32.7% Females 67.3 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.9%	Digestive Disorders 5.3%
Cancer 1.8	Genitourinary Sys. 2.7
Diabetes 4.4	Preg. & Childbirth 0.0
Diseases of Blood 2.7	Arthropathies 8.8
Dementia/Alzheimers 5.3	Osteopathies 1.8
Psychoses/Neuroses 3.5	Perinatal Period 0.0
Central Nervous Sys. 2.7	Ill-Defined Cond. 7.1
Paralysis/CP 2.7	Fractures 6.2
Cardiovascular 14.2	Wounds, Burns 7.1
Stroke 5.3	Compl. of Surgery 0.0
Respiratory 4.4	Other Conditions 13.3

**REVENUE**

Billings \$	1,162,192
Disallowances	397,738
Collections	764,454
Other	0
Total	764,454

**EXPENSES**

Total \$	851,331
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**STAFFING****FTES**

Administrators	1.5
Reg. Nurse Supervisors	0.0
Registered Nurses	4.3
Licensed Practical Nurses	0.0
Home Health Aides	5.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	7.5
Homemakers	0.0
Other Staff	4.4
TOTAL FTES	22.8

**Supportive Home Services**

PO Box 450, 1181 North 4th Avenue  
Park Falls WI 54552 Price County

(715) 762-3200

License Number: 202

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 142

**COUNTIES SERVED**

Ashland  
Oneida  
Price  
Rusk  
Sawyer  
Vilas

**TOTAL NUMBER OF ADMISSIONS** 120

**PERCENT ADMISSIONS FROM:**

Private Residences	23.3%
General Hospitals	60.0
Nursing Homes	4.2
Other	12.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 117

**PERCENT DISCHARGES TO:**

Private Residences	49.6%
General Hospitals	25.6
Nursing Homes	7.7
Deaths	0.9
Other	16.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	133	2,179	16.4
Home Health Aide	70	4,685	66.9
Physical Therapy	53	315	5.9
Spch/Occ/Resp Therapy	13	66	5.1
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	72	6,347	88.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,592	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 67.1%
4 to 34 2.8	Medicaid 26.6
35 to 54 7.0	Other Federal 0.0
55 to 64 9.9	State Funds 0.0
65 to 74 17.6	Private Insurance 5.2
75 to 84 38.0	Self Pay 1.2
85 & over 24.6	Other 0.0
	TOTAL PATIENTS 173

Males 32.4% Females 67.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 7.0%		
Cancer 2.1	Genitourinary Sys. 2.8		
Diabetes 7.7	Preg. & Childbirth 0.0		
Diseases of Blood 0.7	Arthropathies 13.4		
Dementia/Alzheimers 2.8	Osteopathies 5.6		
Psychoses/Neuroses 2.8	Perinatal Period 0.0		
Central Nervous Sys. 4.9	Ill-Defined Cond. 3.5		
Paralysis/CP 0.7	Fractures 6.3		
Cardiovascular 15.5	Wounds, Burns 2.1		
Stroke 7.0	Compl. of Surgery 0.7		
Respiratory 7.0	Other Conditions 7.0		

**REVENUE**

Billings \$	691,199
Disallowances	78,268
Collections	612,931
Other	5,435
Total	618,366

**EXPENSES**

Total \$	676,016
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.2
Licensed Practical Nurses	0.0
Home Health Aides	3.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.9
Homemakers	0.0
Other Staff	4.3
TOTAL FTES	15.5



**Flambeau Home Health & Hospice**

133 North Lake Avenue

Phillips WI 54555

Price County

(715) 339-4371

**COUNTIES SERVED**

Ashland

Iron

Price

Rusk

Sawyer

License Number: 238

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 205

**TOTAL NUMBER OF ADMISSIONS** 188**PERCENT ADMISSIONS FROM:**

Private Residences	21.8%
General Hospitals	71.3
Nursing Homes	6.9
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 203

**PERCENT DISCHARGES TO:**

Private Residences	63.5%
General Hospitals	15.3
Nursing Homes	11.8
Deaths	3.4
Other	5.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	163	2,554	15.7
Home Health Aide	57	2,102	36.9
Physical Therapy	58	536	9.2
Spch/Occ/Resp Therapy	23	119	5.2
Medical Social Service	24	66	2.8
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	76	3,170	41.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	18	792	44.0
TOTAL	XXXXXXX	9,339	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 52.7%
4 to 34 2.0	Medicaid 31.7
35 to 54 8.8	Other Federal 0.0
55 to 64 10.2	State Funds 0.0
65 to 74 21.5	Private Insurance 9.8
75 to 84 36.6	Self Pay 4.9
85 & over 21.0	Other 1.0
	TOTAL PATIENTS 205

Males 42.0% Females 58.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders	2.4%	Digestive Disorders	3.9%
Cancer	8.8	Genitourinary Sys.	2.0
Diabetes	4.4	Preg. & Childbirth	0.0
Diseases of Blood	1.0	Arthropathies	12.7
Dementia/Alzheimers	0.5	Osteopathies	2.4
Psychoses/Neuroses	0.5	Perinatal Period	0.0
Central Nervous Sys.	0.5	Ill-Defined Cond.	2.0
Paralysis/CP	2.0	Fractures	3.4
Cardiovascular	24.9	Wounds, Burns	2.4
Stroke	4.4	Compl. of Surgery	3.4
Respiratory	8.3	Other Conditions	10.2

REVENUE	
Billings \$	735,554
Disallowances	199,810
Collections	535,744
Other	0
Total	535,744

EXPENSES	
Total \$	809,779

**STAFFING****FTES**

Administrators	0.8
Reg. Nurse Supervisors	1.3
Registered Nurses	3.2
Licensed Practical Nurses	0.0
Home Health Aides	5.3
Physical Therapists	0.0
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.8
Other Therapeutic Staff	0.0
Personal Care Workers	2.0
Homemakers	0.5
Other Staff	1.9
TOTAL FTES	15.6

**Gentiva Health Services**

1300 South Green Bay Road, Suite 200  
Racine WI 53406                      Racine County

(262) 636-9036

**COUNTIES SERVED**

Kenosha  
Milwaukee  
Racine  
Walworth

License Number: 3  
Ownership of Agency: Proprietary Corporation  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 375

**TOTAL NUMBER OF ADMISSIONS** 355

**PERCENT ADMISSIONS FROM:**

Private Residences	0.6%
General Hospitals	37.5
Nursing Homes	0.0
Other	62.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 342

**PERCENT DISCHARGES TO:**

Private Residences	93.6%
General Hospitals	2.3
Nursing Homes	0.3
Deaths	0.9
Other	2.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	355	4,467	12.6
Home Health Aide	25	1,409	56.4
Physical Therapy	104	492	4.7
Spch/Occ/Resp Therapy	49	339	6.9
Medical Social Service	3	3	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	8	4,004	500.5
Other Home Health Care	34	229	6.7
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,943	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.5%	Medicare 31.3%
4 to 34 6.9	Medicaid 13.6
35 to 54 24.3	Other Federal 0.0
55 to 64 19.2	State Funds 0.0
65 to 74 16.8	Private Insurance 49.2
75 to 84 16.5	Self Pay 5.9
85 & over 7.7	Other 0.0
	TOTAL PATIENTS 457

Males 41.9%      Females 58.1 %

**PRIMARY DIAGNOSIS**

PRIMARY DIAGNOSIS	PERCENT
Infectious Disorders	1.1%
Cancer	4.5
Diabetes	1.9
Diseases of Blood	1.1
Dementia/Alzheimers	0.3
Psychoses/Neuroses	0.3
Central Nervous Sys.	4.0
Paralysis/CP	0.0
Cardiovascular	20.5
Stroke	0.0
Respiratory	3.7

PRIMARY DIAGNOSIS	PERCENT
Digestive Disorders	1.9%
Genitourinary Sys.	2.1
Preg. & Childbirth	0.3
Arthropathies	0.0
Osteopathies	7.7
Perinatal Period	5.1
Ill-Defined Cond.	17.1
Fractures	5.1
Wounds, Burns	0.0
Compl. of Surgery	5.6
Other Conditions	17.9

**REVENUE**

Billings	\$ 1,558,157
Disallowances	607,569
Collections	950,588
Other	0
Total	950,588

**EXPENSES**

Total	\$ 1,070,697
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**STAFFING****FTES**

Administrators	0.4
Reg. Nurse Supervisors	0.6
Registered Nurses	5.5
Licensed Practical Nurses	5.2
Home Health Aides	13.9
Physical Therapists	1.3
Occupational Therapists	0.8
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTES	30.8

**Sai Home Health Care, Inc.**

5200 Washington Avenue, Suite 227

Racine WI 53406

Racine County

**COUNTIES SERVED**

Kenosha

Milwaukee

Racine

(262) 632-5886

License Number: 305

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 248

**TOTAL NUMBER OF ADMISSIONS** 212**PERCENT ADMISSIONS FROM:**

Private Residences	8.5%
General Hospitals	27.4
Nursing Homes	13.7
Other	50.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 183

**PERCENT DISCHARGES TO:**

Private Residences	76.0%
General Hospitals	7.7
Nursing Homes	7.1
Deaths	7.1
Other	2.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	242	4,106	17.0
Home Health Aide	81	5,009	61.8
Physical Therapy	108	1,043	9.7
Spch/Occ/Resp Therapy	52	326	6.3
Medical Social Service	2	2	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	2	226	113.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,712	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 42.4%
4 to 34 3.2	Medicaid 34.1
35 to 54 18.5	Other Federal 0.0
55 to 64 15.3	State Funds 0.0
65 to 74 18.1	Private Insurance 5.1
75 to 84 21.8	Self Pay 2.7
85 & over 23.0	Other 15.7
	TOTAL PATIENTS 255

Males 27.4% Females 72.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.4%
Cancer 1.6	Genitourinary Sys. 6.9
Diabetes 4.8	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 10.5
Dementia/Alzheimers 0.8	Osteopathies 0.8
Psychoses/Neuroses 1.2	Perinatal Period 0.0
Central Nervous Sys. 5.2	Ill-Defined Cond. 11.3
Paralysis/CP 2.0	Fractures 6.0
Cardiovascular 8.5	Wounds, Burns 4.4
Stroke 5.6	Compl. of Surgery 0.0
Respiratory 6.0	Other Conditions 23.8

**REVENUE**

Billings \$	897,611
Disallowances	230,521
Collections	667,090
Other	609
Total	667,699

**EXPENSES**

Total \$	676,083
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.6
Licensed Practical Nurses	2.8
Home Health Aides	7.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.9
TOTAL FTES	14.4

**Accura Home Health**

2727 South Kemp  
Avalon WI 53505

Rock County

**COUNTIES SERVED**

Dane  
Rock  
Walworth

(608) 676-2337

License Number: 1015

Ownership of Agency: Individual Proprietary

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 68

**TOTAL NUMBER OF ADMISSIONS** 26

**PERCENT ADMISSIONS FROM:**

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 19

**PERCENT DISCHARGES TO:**

Private Residences	0.0%
General Hospitals	36.8
Nursing Homes	15.8
Deaths	10.5
Other	36.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	12	24	2.0
Home Health Aide	1	104	104.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	136	22,534	165.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	22,662	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 45.6	Medicaid 86.8
35 to 54 26.5	Other Federal 0.0
55 to 64 7.4	State Funds 0.0
65 to 74 14.7	Private Insurance 1.5
75 to 84 5.9	Self Pay 2.9
85 & over 0.0	Other 8.8
	TOTAL PATIENTS 68

Males 66.2% Females 33.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 1.5	Genitourinary Sys. 0.0
Diabetes 10.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 4.4
Dementia/Alzheimers 7.4	Osteopathies 0.0
Psychoses/Neuroses 1.5	Perinatal Period 0.0
Central Nervous Sys. 2.9	Ill-Defined Cond. 0.0
Paralysis/CP 51.5	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 1.5	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 19.1

**REVENUE**

Billings \$	1,516,070
Disallowances	1,942
Collections	1,514,128
Other	0
Total	1,514,128

**EXPENSES**

Total \$	1,365,239
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**STAFFING****FTES**

Administrators	0.9
Reg. Nurse Supervisors	1.0
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	4.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	56.7
Homemakers	0.0
Other Staff	3.3
TOTAL FTES	66.0

**At-Home Healthcare**

1969 Hart Road  
Beloit WI 53511

Rock County

**COUNTIES SERVED**

Green  
Rock  
Walworth

(608) 363-5885

License Number: 98

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 424

**TOTAL NUMBER OF ADMISSIONS** 394

**PERCENT ADMISSIONS FROM:**

Private Residences	20.6%
General Hospitals	69.5
Nursing Homes	4.3
Other	5.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 391

**PERCENT DISCHARGES TO:**

Private Residences	80.6%
General Hospitals	5.1
Nursing Homes	4.3
Deaths	4.3
Other	5.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	346	6,014	17.4
Home Health Aide	55	2,267	41.2
Physical Therapy	154	902	5.9
Spch/Occ/Resp Therapy	48	159	3.3
Medical Social Service	11	18	1.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,360	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.7%	Medicare 65.5%
4 to 34 4.0	Medicaid 14.4
35 to 54 17.9	Other Federal 0.0
55 to 64 10.4	State Funds 0.0
65 to 74 19.8	Private Insurance 18.7
75 to 84 23.8	Self Pay 0.9
85 & over 19.3	Other 0.5
	TOTAL PATIENTS 438

Males 40.1% Females 59.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.7%	Digestive Disorders 5.9%		
Cancer 11.1	Genitourinary Sys. 4.7		
Diabetes 2.6	Preg. & Childbirth 0.0		
Diseases of Blood 0.5	Arthropathies 13.2		
Dementia/Alzheimers 0.0	Osteopathies 1.2		
Psychoses/Neuroses 0.2	Perinatal Period 1.9		
Central Nervous Sys. 3.1	Ill-Defined Cond. 7.1		
Paralysis/CP 1.7	Fractures 5.4		
Cardiovascular 13.7	Wounds, Burns 2.4		
Stroke 3.1	Compl. of Surgery 3.1		
Respiratory 3.5	Other Conditions 15.1		

**REVENUE**

Billings \$	1,128,711
Disallowances	212,802
Collections	915,909
Other	0
Total	915,909

**EXPENSES**

Total \$	1,326,084
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.4
Licensed Practical Nurses	0.0
Home Health Aides	2.8
Physical Therapists	0.6
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTES	14.9

**Memorial Community Hospital Home Health Agency**

1011 North Main Street  
Edgerton WI 53534

Rock County

**COUNTIES SERVED**

Dane  
Rock

(608) 884-4910

License Number: 159

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 244

**TOTAL NUMBER OF ADMISSIONS** 212

**PERCENT ADMISSIONS FROM:**

Private Residences	39.6%
General Hospitals	43.4
Nursing Homes	2.4
Other	14.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 213

**PERCENT DISCHARGES TO:**

Private Residences	74.2%
General Hospitals	9.4
Nursing Homes	7.0
Deaths	3.8
Other	5.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	192	2,722	14.2
Home Health Aide	67	1,064	15.9
Physical Therapy	79	819	10.4
Spch/Occ/Resp Therapy	29	180	6.2
Medical Social Service	12	43	3.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	20	756	37.8
Other Home Health Care	13	163	12.5
Homemkr & Other Non HH	32	758	23.7
TOTAL	XXXXXXX	6,505	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 72.1%
4 to 34 2.0	Medicaid 5.7
35 to 54 3.7	Other Federal 0.0
55 to 64 7.0	State Funds 0.0
65 to 74 17.2	Private Insurance 7.0
75 to 84 35.7	Self Pay 11.5
85 & over 34.4	Other 3.7
	TOTAL PATIENTS 244

Males 36.5% Females 63.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.4%	Digestive Disorders 4.1%
Cancer 4.9	Genitourinary Sys. 2.5
Diabetes 12.7	Preg. & Childbirth 0.0
Diseases of Blood 1.2	Arthropathies 11.9
Dementia/Alzheimers 1.2	Osteopathies 1.2
Psychoses/Neuroses 0.8	Perinatal Period 0.0
Central Nervous Sys. 2.0	Ill-Defined Cond. 7.8
Paralysis/CP 1.2	Fractures 7.4
Cardiovascular 13.5	Wounds, Burns 1.6
Stroke 4.9	Compl. of Surgery 1.6
Respiratory 7.0	Other Conditions 11.9

**REVENUE**

Billings \$	706,738
Disallowances	18,485
Collections	688,253
Other	5,135
Total	693,388

**EXPENSES**

Total \$	637,702
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	4.8
Licensed Practical Nurses	0.0
Home Health Aides	1.4
Physical Therapists	0.6
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.7
Homemakers	0.0
Other Staff	1.5
TOTAL FTES	10.1

**Mercy Assisted Care, Inc.**

901 Mineral Point Avenue  
Janesville WI 53548

Rock County

(608) 754-2201

**COUNTIES SERVED**

Dane  
Green  
Jefferson  
Rock  
Walworth

License Number: 99

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 1,001

**TOTAL NUMBER OF ADMISSIONS** 954

**PERCENT ADMISSIONS FROM:**

Private Residences	39.8%
General Hospitals	44.9
Nursing Homes	11.6
Other	3.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 963

**PERCENT DISCHARGES TO:**

Private Residences	81.2%
General Hospitals	3.5
Nursing Homes	4.4
Deaths	3.4
Other	7.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	897	10,283	11.5
Home Health Aide	299	9,002	30.1
Physical Therapy	475	2,647	5.6
Spch/Occ/Resp Therapy	264	1,075	4.1
Medical Social Service	70	76	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	199	12,793	64.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	74	13,069	176.6
TOTAL	XXXXXXX	48,945	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 60.0%
4 to 34 3.2	Medicaid 14.7
35 to 54 9.8	Other Federal 0.0
55 to 64 10.0	State Funds 0.0
65 to 74 20.2	Private Insurance 17.5
75 to 84 26.9	Self Pay 5.0
85 & over 29.4	Other 2.9
	TOTAL PATIENTS 1,111

Males 33.7% Females 66.3 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.1%	Digestive Disorders 5.7%
Cancer 5.5	Genitourinary Sys. 4.3
Diabetes 4.7	Preg. & Childbirth 0.0
Diseases of Blood 2.6	Arthropathies 23.3
Dementia/Alzheimers 1.0	Osteopathies 1.2
Psychoses/Neuroses 0.7	Perinatal Period 0.0
Central Nervous Sys. 1.7	Ill-Defined Cond. 5.3
Paralysis/CP 1.3	Fractures 7.5
Cardiovascular 14.9	Wounds, Burns 2.1
Stroke 3.5	Compl. of Surgery 2.8
Respiratory 9.9	Other Conditions 1.0

**REVENUE**

Billings \$	2,814,085
Disallowances	55,844
Collections	2,758,241
Other	9,329
Total	2,767,570

**EXPENSES**

Total \$	2,755,675
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	13.8
Licensed Practical Nurses	0.0
Home Health Aides	9.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	1.1
Other Therapeutic Staff	0.0
Personal Care Workers	8.6
Homemakers	6.4
Other Staff	12.5
TOTAL FTEs	53.9

**Indianhead Home Health Care Agency**

209 East Third Street S, Box 10

Ladysmith WI 54848

Rusk County

(715) 532-5594

**COUNTIES SERVED**

Barron

Polk

Rusk

St. Croix

Washburn

License Number: 295

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 75

**TOTAL NUMBER OF ADMISSIONS** 70**PERCENT ADMISSIONS FROM:**

Private Residences	40.0%
General Hospitals	47.1
Nursing Homes	12.9
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 66

**PERCENT DISCHARGES TO:**

Private Residences	22.7%
General Hospitals	66.7
Nursing Homes	1.5
Deaths	3.0
Other	6.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	58	972	16.8
Home Health Aide	13	1,046	80.5
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	26	1,268	48.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,286	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 9.1%
4 to 34 4.0	Medicaid 64.9
35 to 54 16.0	Other Federal 0.0
55 to 64 9.3	State Funds 0.0
65 to 74 21.3	Private Insurance 16.9
75 to 84 28.0	Self Pay 3.9
85 & over 21.3	Other 5.2
	TOTAL PATIENTS 77

Males 32.0% Females 68.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 2.7%
Cancer 2.7	Genitourinary Sys. 1.3
Diabetes 8.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 13.3
Dementia/Alzheimers 6.7	Osteopathies 0.0
Psychoses/Neuroses 18.7	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 1.3
Paralysis/CP 4.0	Fractures 0.0
Cardiovascular 14.7	Wounds, Burns 2.7
Stroke 6.7	Compl. of Surgery 1.3
Respiratory 5.3	Other Conditions 10.7

**REVENUE**

Billings \$	258,522
Disallowances	58,870
Collections	199,652
Other	0
Total	199,652

**EXPENSES**

Total \$	176,680
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**STAFFING****FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.3
Registered Nurses	0.3
Licensed Practical Nurses	0.0
Home Health Aides	1.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.8
Homemakers	0.0
Other Staff	0.3
TOTAL FTEs	5.0



**Rusk County Department of Health & Human Services**

311 Miner Avenue East, Suite C220

Ladysmith WI 54848

Rusk County

**COUNTIES SERVED**

Rusk

(715) 532-2299

License Number: 100

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 160

**TOTAL NUMBER OF ADMISSIONS** 184**PERCENT ADMISSIONS FROM:**

Private Residences	33.2%
General Hospitals	50.5
Nursing Homes	15.8
Other	0.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 189

**PERCENT DISCHARGES TO:**

Private Residences	71.4%
General Hospitals	5.3
Nursing Homes	15.3
Deaths	6.3
Other	1.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	160	2,123	13.3
Home Health Aide	76	1,437	18.9
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,560	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 81.5%
4 to 34 1.3	Medicaid 8.9
35 to 54 7.5	Other Federal 0.0
55 to 64 8.1	State Funds 0.0
65 to 74 21.3	Private Insurance 7.1
75 to 84 32.5	Self Pay 0.0
85 & over 28.1	Other 2.4
	TOTAL PATIENTS 168

Males 45.6% Females 54.4 %

PRIMARY DIAGNOSIS			
Infectious Disorders 1.9%	Digestive Disorders 3.8%		
Cancer 10.6	Genitourinary Sys. 5.0		
Diabetes 3.8	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 3.1		
Dementia/Alzheimers 1.3	Osteopathies 1.9		
Psychoses/Neuroses 0.0	Perinatal Period 0.0		
Central Nervous Sys. 2.5	Ill-Defined Cond. 3.1		
Paralysis/CP 0.6	Fractures 6.3		
Cardiovascular 18.1	Wounds, Burns 29.4		
Stroke 1.3	Compl. of Surgery 1.3		
Respiratory 5.6	Other Conditions 0.6		

**REVENUE**

Billings \$	382,736
Disallowances	-4,466
Collections	387,202
Other	104,590
Total	491,792

**EXPENSES**

Total \$	491,792
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.6
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTEs	10.6

**Heartland Home Health**

990 Hillcrest Street, Suite 104

Baldwin WI 54002

St. Croix County

(715) 684-5020

**COUNTIES SERVED**

Dunn

Pierce

Polk

St. Croix

License Number: 128

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 328

**TOTAL NUMBER OF ADMISSIONS** 336**PERCENT ADMISSIONS FROM:**

Private Residences	34.5%
General Hospitals	52.4
Nursing Homes	8.9
Other	4.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 336

**PERCENT DISCHARGES TO:**

Private Residences	90.2%
General Hospitals	3.0
Nursing Homes	2.7
Deaths	3.3
Other	0.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	274	2,256	8.2
Home Health Aide	70	481	6.9
Physical Therapy	126	979	7.8
Spch/Occ/Resp Therapy	43	297	6.9
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,013	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 14.3%	Medicare 53.6%
4 to 34 4.9	Medicaid 2.6
35 to 54 14.0	Other Federal 0.0
55 to 64 10.7	State Funds 0.0
65 to 74 20.4	Private Insurance 41.2
75 to 84 24.1	Self Pay 0.6
85 & over 11.6	Other 2.0
	TOTAL PATIENTS 347

Males 41.5% Females 58.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.9%	Digestive Disorders 6.4%
Cancer 5.8	Genitourinary Sys. 2.7
Diabetes 2.4	Preg. & Childbirth 0.6
Diseases of Blood 0.3	Arthropathies 17.1
Dementia/Alzheimers 0.0	Osteopathies 1.2
Psychoses/Neuroses 0.3	Perinatal Period 12.8
Central Nervous Sys. 1.5	Ill-Defined Cond. 6.4
Paralysis/CP 0.3	Fractures 7.0
Cardiovascular 8.5	Wounds, Burns 0.9
Stroke 1.2	Compl. of Surgery 5.5
Respiratory 7.0	Other Conditions 11.0

**REVENUE**

Billings \$	606,033
Disallowances	43,756
Collections	562,277
Other	201,373
Total	763,650

**EXPENSES**

Total \$	749,822
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.7
Registered Nurses	4.4
Licensed Practical Nurses	0.0
Home Health Aides	0.6
Physical Therapists	0.8
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.4
TOTAL FTES	10.8

**REM Health of Wisconsin, Inc.**

1007 Washington Avenue  
Baraboo WI 53913

Sauk County

(608) 356-7570

License Number: 36

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 308

**COUNTIES SERVED**

Adams  
Columbia  
Dane  
Dodge  
Green Lake  
Iowa  
Juneau  
Marquette  
Monroe  
Richland  
Rock  
Sauk  
Vernon

**TOTAL NUMBER OF ADMISSIONS** 182

**PERCENT ADMISSIONS FROM:**

Private Residences	14.8%
General Hospitals	79.1
Nursing Homes	6.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 193

**PERCENT DISCHARGES TO:**

Private Residences	53.9%
General Hospitals	6.2
Nursing Homes	13.0
Deaths	7.8
Other	19.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	253	8,079	31.9
Home Health Aide	82	9,268	113.0
Physical Therapy	70	760	10.9
Spch/Occ/Resp Therapy	5	17	3.4
Medical Social Service	0	0	0.0
Private Duty Nursing	17	2,604	153.2
Personal Care/PC RN Supv.	215	47,074	218.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	67,802	XXXXX

**AGE AND SEX OF PATIENTS**

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.2%	Medicare 23.0%
4 to 34 10.1	Medicaid 52.3
35 to 54 23.1	Other Federal 0.0
55 to 64 14.0	State Funds 0.0
65 to 74 19.8	Private Insurance 14.2
75 to 84 16.2	Self Pay 10.0
85 & over 13.6	Other 0.6
	TOTAL PATIENTS 331

Males 51.9% Females 48.1 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.6%	Digestive Disorders 3.2%
Cancer 7.8	Genitourinary Sys. 1.9
Diabetes 6.2	Preg. & Childbirth 0.3
Diseases of Blood 4.5	Arthropathies 4.9
Dementia/Alzheimers 2.9	Osteopathies 3.2
Psychoses/Neuroses 6.5	Perinatal Period 0.6
Central Nervous Sys. 4.5	Ill-Defined Cond. 0.0
Paralysis/CP 5.2	Fractures 7.5
Cardiovascular 8.1	Wounds, Burns 6.8
Stroke 3.9	Compl. of Surgery 6.5
Respiratory 3.2	Other Conditions 11.4

**REVENUE**

Billings \$	3,723,350
Disallowances	1,504,004
Collections	2,219,346
Other	0
Total	2,219,346

**EXPENSES**

Total \$	2,704,190
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**STAFFING****FTES**

Administrators	0.8
Reg. Nurse Supervisors	5.0
Registered Nurses	14.0
Licensed Practical Nurses	4.6
Home Health Aides	3.9
Physical Therapists	0.7
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	21.6
Homemakers	0.0
Other Staff	8.3
TOTAL FTES	58.7

**Sauk County Health Department**

505 Broadway, Suite 372

Baraboo WI 53913

Sauk County

**COUNTIES SERVED**

Sauk

(608) 355-3290

License Number: 102

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 139

**TOTAL NUMBER OF ADMISSIONS** 119**PERCENT ADMISSIONS FROM:**

Private Residences	21.8%
General Hospitals	51.3
Nursing Homes	11.8
Other	15.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 107

**PERCENT DISCHARGES TO:**

Private Residences	61.7%
General Hospitals	5.6
Nursing Homes	6.5
Deaths	6.5
Other	19.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	139	3,218	23.2
Home Health Aide	73	2,973	40.7
Physical Therapy	36	256	7.1
Spch/Occ/Resp Therapy	16	42	2.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,489	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 63.1%
4 to 34 3.6	Medicaid 20.1
35 to 54 12.9	Other Federal 0.0
55 to 64 8.6	State Funds 0.0
65 to 74 15.8	Private Insurance 7.4
75 to 84 30.2	Self Pay 5.4
85 & over 26.6	Other 4.0
	TOTAL PATIENTS 149

Males 38.8% Females 61.2 %

PRIMARY DIAGNOSIS			
Infectious Disorders 2.2%	Digestive Disorders 2.9%		
Cancer 6.5	Genitourinary Sys. 2.9		
Diabetes 9.4	Preg. & Childbirth 0.0		
Diseases of Blood 3.6	Arthropathies 10.8		
Dementia/Alzheimers 0.0	Osteopathies 2.2		
Psychoses/Neuroses 1.4	Perinatal Period 0.0		
Central Nervous Sys. 2.9	Ill-Defined Cond. 4.3		
Paralysis/CP 0.7	Fractures 5.8		
Cardiovascular 19.4	Wounds, Burns 0.7		
Stroke 2.9	Compl. of Surgery 0.7		
Respiratory 12.9	Other Conditions 7.9		

**REVENUE**

Billings \$	610,047
Disallowances	171,737
Collections	438,310
Other	21,230
Total	459,540

**EXPENSES**

Total \$	613,624
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.0
Licensed Practical Nurses	0.0
Home Health Aides	2.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.7
TOTAL FTEs	10.6

**Sawyer County Health and Human Services**

105 East 4th Street

Hayward WI 54843

Sawyer County

**COUNTIES SERVED**

Sawyer

(715) 634-4806

License Number: 103

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 125

**TOTAL NUMBER OF ADMISSIONS** 99**PERCENT ADMISSIONS FROM:**

Private Residences	27.3%
General Hospitals	54.5
Nursing Homes	18.2
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 102

**PERCENT DISCHARGES TO:**

Private Residences	76.5%
General Hospitals	7.8
Nursing Homes	3.9
Deaths	2.9
Other	8.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	125	796	6.4
Home Health Aide	41	627	15.3
Physical Therapy	97	1,897	19.6
Spch/Occ/Resp Therapy	1	2	2.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,322	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 76.8%
4 to 34 2.4	Medicaid 14.4
35 to 54 8.0	Other Federal 0.0
55 to 64 13.6	State Funds 0.0
65 to 74 26.4	Private Insurance 8.8
75 to 84 28.8	Self Pay 0.0
85 & over 20.8	Other 0.0
	TOTAL PATIENTS 125

Males 41.6% Females 58.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.8%
Cancer 3.2	Genitourinary Sys. 0.8
Diabetes 1.6	Preg. & Childbirth 0.0
Diseases of Blood 2.4	Arthropathies 26.4
Dementia/Alzheimers 0.0	Osteopathies 1.6
Psychoses/Neuroses 2.4	Perinatal Period 0.0
Central Nervous Sys. 8.8	Ill-Defined Cond. 16.8
Paralysis/CP 2.4	Fractures 12.8
Cardiovascular 8.0	Wounds, Burns 1.6
Stroke 4.0	Compl. of Surgery 0.0
Respiratory 4.0	Other Conditions 2.4

**REVENUE**

Billings \$	480,411
Disallowances	18,424
Collections	461,987
Other	0
Total	461,987

**EXPENSES**

Total \$	468,649
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.7
Licensed Practical Nurses	0.0
Home Health Aides	2.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	6.0

**Shawano Community Home Care**

309 North Bartlette Street

Shawano WI 54166

Shawano County

(715) 524-2169

License Number: 104

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 228

**COUNTIES SERVED**

Brown

Marathon

Menominee

Oconto

Shawano

Waupaca

**TOTAL NUMBER OF ADMISSIONS** 218**PERCENT ADMISSIONS FROM:**

Private Residences	24.3%
General Hospitals	68.8
Nursing Homes	6.4
Other	0.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 184

**PERCENT DISCHARGES TO:**

Private Residences	39.1%
General Hospitals	7.1
Nursing Homes	10.9
Deaths	39.7
Other	3.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	228	2,008	8.8
Home Health Aide	42	895	21.3
Physical Therapy	97	635	6.5
Spch/Occ/Resp Therapy	57	202	3.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	32	1,891	59.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,631	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 68.2%
4 to 34 4.4	Medicaid 12.6
35 to 54 14.5	Other Federal 0.0
55 to 64 13.6	State Funds 0.0
65 to 74 18.0	Private Insurance 17.7
75 to 84 28.1	Self Pay 0.7
85 & over 20.2	Other 0.7
	TOTAL PATIENTS 277

Males 48.2% Females 51.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.4%	Digestive Disorders 9.6%
Cancer 8.3	Genitourinary Sys. 0.0
Diabetes 3.5	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 8.3
Dementia/Alzheimers 0.0	Osteopathies 2.6
Psychoses/Neuroses 0.4	Perinatal Period 0.0
Central Nervous Sys. 4.4	Ill-Defined Cond. 5.3
Paralysis/CP 3.5	Fractures 4.4
Cardiovascular 24.1	Wounds, Burns 9.2
Stroke 3.1	Compl. of Surgery 2.2
Respiratory 8.3	Other Conditions 1.3

**REVENUE**

Billings \$	524,976
Disallowances	52,350
Collections	472,626
Other	0
Total	472,626

**EXPENSES**

Total \$	588,970
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	3.0
Licensed Practical Nurses	0.0
Home Health Aides	2.4
Physical Therapists	0.6
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	8.1

**St. Nicholas Hospital Home Health & Hospice**

1601 North Taylor Drive

Sheboygan WI 53801

Sheboygan County

(920) 457-5770

**COUNTIES SERVED**

Calumet

Manitowoc

Ozaukee

Sheboygan

License Number: 124

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 450

**TOTAL NUMBER OF ADMISSIONS** 475**PERCENT ADMISSIONS FROM:**

Private Residences	35.6%
General Hospitals	57.7
Nursing Homes	5.1
Other	1.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 483

**PERCENT DISCHARGES TO:**

Private Residences	57.3%
General Hospitals	32.7
Nursing Homes	2.9
Deaths	1.2
Other	5.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	403	6,653	16.5
Home Health Aide	134	3,615	27.0
Physical Therapy	89	771	8.7
Spch/Occ/Resp Therapy	31	289	9.3
Medical Social Service	35	39	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	139	9,878	71.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	51	1,206	23.6
TOTAL	XXXXXXX	22,451	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.2%	Medicare 53.3%
4 to 34 4.9	Medicaid 17.5
35 to 54 9.6	Other Federal 0.0
55 to 64 10.2	State Funds 0.0
65 to 74 18.7	Private Insurance 25.2
75 to 84 35.8	Self Pay 3.1
85 & over 20.7	Other 0.8
	TOTAL PATIENTS 840

Males 40.7% Females 59.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.9%	Digestive Disorders 5.8%
Cancer 10.4	Genitourinary Sys. 2.0
Diabetes 6.4	Preg. & Childbirth 0.0
Diseases of Blood 0.4	Arthropathies 7.6
Dementia/Alzheimers 0.7	Osteopathies 1.6
Psychoses/Neuroses 0.9	Perinatal Period 0.4
Central Nervous Sys. 3.1	Ill-Defined Cond. 7.8
Paralysis/CP 1.8	Fractures 5.1
Cardiovascular 16.4	Wounds, Burns 2.0
Stroke 3.3	Compl. of Surgery 0.9
Respiratory 6.4	Other Conditions 16.0

**REVENUE**

Billings \$	1,259,955
Disallowances	194,661
Collections	1,065,294
Other	122,020
Total	1,187,314

**EXPENSES**

Total \$	2,106,733
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**STAFFING****FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	11.1
Licensed Practical Nurses	0.0
Home Health Aides	4.0
Physical Therapists	0.4
Occupational Therapists	0.5
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	5.5
Homemakers	0.8
Other Staff	7.8
TOTAL FTEs	31.3

**Trempealeau County Health Department**

Courthouse

Whitehall WI 54773

Trempealeau County

**COUNTIES SERVED**

Trempealeau

(715) 538-2311

License Number: 107

Ownership of Agency: County

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 62

**TOTAL NUMBER OF ADMISSIONS** 50**PERCENT ADMISSIONS FROM:**

Private Residences	88.0%
General Hospitals	4.0
Nursing Homes	8.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 14

**PERCENT DISCHARGES TO:**

Private Residences	35.7%
General Hospitals	0.0
Nursing Homes	50.0
Deaths	14.3
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	62	258	4.2
Home Health Aide	2	46	23.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	114	2,917	25.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,221	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 4.8	Medicaid 82.5
35 to 54 12.9	Other Federal 0.0
55 to 64 4.8	State Funds 0.0
65 to 74 16.1	Private Insurance 3.2
75 to 84 40.3	Self Pay 9.5
85 & over 21.0	Other 4.8
	TOTAL PATIENTS 63

Males 16.1% Females 83.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 0.0	Genitourinary Sys. 0.0		
Diabetes 3.2	Preg. & Childbirth 3.2		
Diseases of Blood 1.6	Arthropathies 61.3		
Dementia/Alzheimers 4.8	Osteopathies 1.6		
Psychoses/Neuroses 0.0	Perinatal Period 0.0		
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0		
Paralysis/CP 1.6	Fractures 3.2		
Cardiovascular 11.3	Wounds, Burns 0.0		
Stroke 4.8	Compl. of Surgery 0.0		
Respiratory 1.6	Other Conditions 1.6		

**REVENUE**

Billings \$	45,557
Disallowances	7,058
Collections	38,499
Other	0
Total	38,499

**EXPENSES**

Total \$	191,255
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**STAFFING****FTES**

Administrators	0.2
Reg. Nurse Supervisors	0.1
Registered Nurses	0.6
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTES	1.0



**Vernon Memorial Hospital Home Health Care Agency**

507 South Main Street

Viroqua WI 54665

Vernon County

(608) 637-4362

**COUNTIES SERVED**

Crawford

Grant

Monroe

Richland

Vernon

License Number: 271

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 137

**TOTAL NUMBER OF ADMISSIONS** 141**PERCENT ADMISSIONS FROM:**

Private Residences	17.7%
General Hospitals	70.9
Nursing Homes	11.3
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 135

**PERCENT DISCHARGES TO:**

Private Residences	84.4%
General Hospitals	0.7
Nursing Homes	3.0
Deaths	5.2
Other	6.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	137	1,329	9.7
Home Health Aide	30	460	15.3
Physical Therapy	67	358	5.3
Spch/Occ/Resp Therapy	26	134	5.2
Medical Social Service	17	19	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,300	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 73.0%
4 to 34 4.4	Medicaid 8.8
35 to 54 8.0	Other Federal 0.0
55 to 64 11.7	State Funds 0.0
65 to 74 19.7	Private Insurance 15.3
75 to 84 32.1	Self Pay 0.7
85 & over 21.9	Other 2.2
	TOTAL PATIENTS 137

Males 43.1% Females 56.9 %

PRIMARY DIAGNOSIS			
Infectious Disorders 2.9%	Digestive Disorders 4.4%		
Cancer 3.6	Genitourinary Sys. 2.2		
Diabetes 3.6	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 10.2		
Dementia/Alzheimers 0.0	Osteopathies 2.2		
Psychoses/Neuroses 0.7	Perinatal Period 0.0		
Central Nervous Sys. 0.7	Ill-Defined Cond. 5.8		
Paralysis/CP 0.0	Fractures 3.6		
Cardiovascular 22.6	Wounds, Burns 2.9		
Stroke 2.2	Compl. of Surgery 2.9		
Respiratory 10.9	Other Conditions 18.2		

REVENUE	
Billings \$	164,282
Disallowances	-5,599
Collections	169,881
Other	0
Total	169,881

EXPENSES	
Total \$	264,850

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	2.0
Licensed Practical Nurses	0.0
Home Health Aides	0.5
Physical Therapists	0.4
Occupational Therapists	0.2
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTES	5.4

**Home Care Network**

N3252 County Road H  
Lake Geneva WI 53147

Walworth County

**COUNTIES SERVED**

Kenosha  
Racine  
Walworth

(262) 248-0457

License Number: 125

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 178

**TOTAL NUMBER OF ADMISSIONS** 152

**PERCENT ADMISSIONS FROM:**

Private Residences	27.0%
General Hospitals	59.9
Nursing Homes	8.6
Other	4.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 154

**PERCENT DISCHARGES TO:**

Private Residences	77.3%
General Hospitals	5.2
Nursing Homes	5.2
Deaths	3.9
Other	8.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	174	2,430	14.0
Home Health Aide	14	78	5.6
Physical Therapy	112	1,310	11.7
Spch/Occ/Resp Therapy	104	936	9.0
Medical Social Service	16	84	5.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,838	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 78.1%
4 to 34 1.1	Medicaid 0.5
35 to 54 7.3	Other Federal 0.0
55 to 64 11.8	State Funds 0.0
65 to 74 21.3	Private Insurance 18.6
75 to 84 36.5	Self Pay 2.7
85 & over 21.9	Other 0.0
	TOTAL PATIENTS 183

Males 33.1% Females 66.9 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.1%	Digestive Disorders 1.1%
Cancer 2.8	Genitourinary Sys. 1.7
Diabetes 8.4	Preg. & Childbirth 0.0
Diseases of Blood 0.6	Arthropathies 1.7
Dementia/Alzheimers 0.6	Osteopathies 0.0
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 4.5	Ill-Defined Cond. 2.8
Paralysis/CP 1.1	Fractures 7.3
Cardiovascular 6.2	Wounds, Burns 44.4
Stroke 9.6	Compl. of Surgery 0.0
Respiratory 3.4	Other Conditions 2.2

**REVENUE**

Billings \$	743,955
Disallowances	4,757
Collections	739,198
Other	0
Total	739,198

**EXPENSES**

Total \$	592,448
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	1.8
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.6
Occupational Therapists	0.2
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	6.6

**Hearts of Gold, Inc.**

38 West 5th Avenue, PO Box 220  
Shell Lake WI 54871

Washburn County

(715) 468-2931

License Number: 304

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 159

**COUNTIES SERVED**

Barron  
Burnett  
Douglas  
Polk  
Sawyer  
Washburn

**TOTAL NUMBER OF ADMISSIONS** 149

**PERCENT ADMISSIONS FROM:**

Private Residences	20.8%
General Hospitals	67.1
Nursing Homes	6.7
Other	5.4

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 132

**PERCENT DISCHARGES TO:**

Private Residences	70.5%
General Hospitals	17.4
Nursing Homes	4.5
Deaths	3.0
Other	4.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	159	1,910	12.0
Home Health Aide	66	1,293	19.6
Physical Therapy	15	99	6.6
Spch/Occ/Resp Therapy	1	6	6.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	32	736	23.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,044	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 61.7%
4 to 34 0.0	Medicaid 16.0
35 to 54 9.4	Other Federal 0.0
55 to 64 10.1	State Funds 0.0
65 to 74 15.1	Private Insurance 8.0
75 to 84 38.4	Self Pay 7.4
85 & over 25.8	Other 6.9
	TOTAL PATIENTS 175

Males 35.2% Females 64.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 10.7%	Digestive Disorders 5.7%
Cancer 4.4	Genitourinary Sys. 3.8
Diabetes 2.5	Preg. & Childbirth 0.0
Diseases of Blood 2.5	Arthropathies 9.4
Dementia/Alzheimers 1.9	Osteopathies 1.3
Psychoses/Neuroses 1.3	Perinatal Period 0.6
Central Nervous Sys. 1.9	Ill-Defined Cond. 2.5
Paralysis/CP 0.6	Fractures 5.0
Cardiovascular 15.7	Wounds, Burns 3.8
Stroke 3.1	Compl. of Surgery 1.3
Respiratory 8.2	Other Conditions 13.8

**REVENUE**

Billings \$	462,501
Disallowances	0
Collections	462,501
Other	250
Total	462,751

**EXPENSES**

Total \$	445,978
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	1.0
Licensed Practical Nurses	1.8
Home Health Aides	2.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.9
TOTAL FTES	9.9

**Indianhead Medical Center Inc., Home Health Agency**

113 4th Avenue  
Shell Lake WI 54871

Washburn County

(715) 468-7833

**COUNTIES SERVED**

Barron  
Burnett  
Polk  
Sawyer  
Washburn

License Number: 324

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 84

**TOTAL NUMBER OF ADMISSIONS** 83

**PERCENT ADMISSIONS FROM:**

Private Residences	30.1%
General Hospitals	65.1
Nursing Homes	4.8
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 79

**PERCENT DISCHARGES TO:**

Private Residences	67.1%
General Hospitals	12.7
Nursing Homes	3.8
Deaths	6.3
Other	10.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	82	1,235	15.1
Home Health Aide	33	423	12.8
Physical Therapy	35	324	9.3
Spch/Occ/Resp Therapy	8	17	2.1
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,999	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.4%	Medicare 76.5%
4 to 34 4.8	Medicaid 14.1
35 to 54 4.8	Other Federal 0.0
55 to 64 7.1	State Funds 0.0
65 to 74 20.2	Private Insurance 8.2
75 to 84 34.5	Self Pay 0.0
85 & over 26.2	Other 1.2
	TOTAL PATIENTS 85

Males 39.3% Females 60.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 2.4%	Digestive Disorders 4.8%
Cancer 13.1	Genitourinary Sys. 0.0
Diabetes 7.1	Preg. & Childbirth 0.0
Diseases of Blood 1.2	Arthropathies 8.3
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 1.2	Perinatal Period 1.2
Central Nervous Sys. 1.2	Ill-Defined Cond. 0.0
Paralysis/CP 1.2	Fractures 10.7
Cardiovascular 17.9	Wounds, Burns 3.6
Stroke 3.6	Compl. of Surgery 1.2
Respiratory 8.3	Other Conditions 13.1

**REVENUE**

Billings \$	204,241
Disallowances	2,576
Collections	201,665
Other	0
Total	201,665

**EXPENSES**

Total \$	278,043
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	1.0
Registered Nurses	1.3
Licensed Practical Nurses	0.0
Home Health Aides	0.4
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTES	3.8

**Spooner Health System Home Care**

819 Ash Street  
 Spooner WI 54801

Washburn County

(715) 635-2111

**COUNTIES SERVED**

Burnett  
 Douglas  
 Sawyer  
 Washburn

License Number: 208

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 141

**TOTAL NUMBER OF ADMISSIONS** 132

**PERCENT ADMISSIONS FROM:**

Private Residences	18.9%
General Hospitals	61.4
Nursing Homes	18.2
Other	1.5

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 120

**PERCENT DISCHARGES TO:**

Private Residences	73.3%
General Hospitals	17.5
Nursing Homes	4.2
Deaths	1.7
Other	3.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	138	1,741	12.6
Home Health Aide	67	1,434	21.4
Physical Therapy	83	636	7.7
Spch/Occ/Resp Therapy	62	225	3.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	6	582	97.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	8	492	61.5
TOTAL	XXXXXXX	5,110	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 69.5%
4 to 34 2.1	Medicaid 13.0
35 to 54 9.2	Other Federal 0.0
55 to 64 7.8	State Funds 0.0
65 to 74 23.4	Private Insurance 8.4
75 to 84 36.2	Self Pay 9.1
85 & over 21.3	Other 0.0
	TOTAL PATIENTS 154

Males 27.7% Females 72.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.7%	Digestive Disorders 5.7%
Cancer 5.7	Genitourinary Sys. 2.8
Diabetes 2.8	Preg. & Childbirth 0.0
Diseases of Blood 0.7	Arthropathies 22.7
Dementia/Alzheimers 0.7	Osteopathies 0.7
Psychoses/Neuroses 2.1	Perinatal Period 0.0
Central Nervous Sys. 2.1	Ill-Defined Cond. 5.7
Paralysis/CP 0.7	Fractures 10.6
Cardiovascular 14.2	Wounds, Burns 0.7
Stroke 3.5	Compl. of Surgery 3.5
Respiratory 8.5	Other Conditions 5.7

**REVENUE**

Billings \$	513,554
Disallowances	91,396
Collections	422,158
Other	0
Total	422,158

**EXPENSES**

Total \$	432,903
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.0
Licensed Practical Nurses	0.0
Home Health Aides	1.5
Physical Therapists	0.5
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.4
Homemakers	0.0
Other Staff	1.4
TOTAL FTES	8.1

**Heartland Home Health Care and Hospice**

1072 Gateway Court

West Bend WI 53095

Washington County

(262) 334-1988

**COUNTIES SERVED**

Dodge

Fond du Lac

Ozaukee

Washington

License Number: 1024

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 116

**TOTAL NUMBER OF ADMISSIONS** 131**PERCENT ADMISSIONS FROM:**

Private Residences	18.3%
General Hospitals	17.6
Nursing Homes	12.2
Other	51.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 36

**PERCENT DISCHARGES TO:**

Private Residences	63.9%
General Hospitals	8.3
Nursing Homes	2.8
Deaths	0.0
Other	25.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	116	817	7.0
Home Health Aide	74	1,426	19.3
Physical Therapy	66	279	4.2
Spch/Occ/Resp Therapy	50	214	4.3
Medical Social Service	20	22	1.1
Private Duty Nursing	1	5	5.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	6	90	15.0
TOTAL	XXXXXXX	2,853	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 58.6%
4 to 34 1.7	Medicaid 21.6
35 to 54 8.6	Other Federal 0.0
55 to 64 7.8	State Funds 0.0
65 to 74 15.5	Private Insurance 7.8
75 to 84 34.5	Self Pay 2.6
85 & over 31.9	Other 9.5
	TOTAL PATIENTS 116

Males 34.5% Females 65.5 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.7%	Digestive Disorders 1.7%
Cancer 6.9	Genitourinary Sys. 0.0
Diabetes 10.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.4
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.6	Ill-Defined Cond. 4.3
Paralysis/CP 1.7	Fractures 19.8
Cardiovascular 12.1	Wounds, Burns 0.9
Stroke 3.4	Compl. of Surgery 1.7
Respiratory 2.6	Other Conditions 26.7

**REVENUE**

Billings \$	322,723
Disallowances	79,201
Collections	243,522
Other	0
Total	243,522

**EXPENSES**

Total \$	242,275
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.8
Licensed Practical Nurses	3.5
Home Health Aides	9.0
Physical Therapists	1.0
Occupational Therapists	0.5
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.5
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.9
Other Staff	1.4
TOTAL FTES	23.5

**Heartland Home Health Care & Hospice**  
 13255 West Bluemound Road, Suite 100  
 Brookfield WI 53005 Waukesha County

(262) 641-6620

License Number: 280  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 1,010

**COUNTIES SERVED**

Dodge  
 Jefferson  
 Milwaukee  
 Ozaukee  
 Sheboygan  
 Washington  
 Waukesha

**TOTAL NUMBER OF ADMISSIONS** 1,010

**PERCENT ADMISSIONS FROM:**

Private Residences	10.8%
General Hospitals	27.4
Nursing Homes	36.7
Other	25.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,091

**PERCENT DISCHARGES TO:**

Private Residences	59.3%
General Hospitals	10.3
Nursing Homes	3.8
Deaths	0.2
Other	26.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	925	12,838	13.9
Home Health Aide	364	20,982	57.6
Physical Therapy	559	3,983	7.1
Spch/Occ/Resp Therapy	312	1,476	4.7
Medical Social Service	159	174	1.1
Private Duty Nursing	1	10	10.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	10	643	64.3
TOTAL	XXXXXXX	40,106	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 63.2%
4 to 34 2.7	Medicaid 4.5
35 to 54 10.3	Other Federal 0.0
55 to 64 10.4	State Funds 0.0
65 to 74 17.2	Private Insurance 18.2
75 to 84 34.1	Self Pay 2.9
85 & over 25.3	Other 11.3
	TOTAL PATIENTS 1,010

Males 40.4% Females 59.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders	1.3%	Digestive Disorders	3.7%
Cancer	4.1	Genitourinary Sys.	2.8
Diabetes	2.9	Preg. & Childbirth	0.1
Diseases of Blood	1.1	Arthropathies	5.4
Dementia/Alzheimers	0.5	Osteopathies	2.1
Psychoses/Neuroses	1.3	Perinatal Period	4.4
Central Nervous Sys.	4.4	Ill-Defined Cond.	15.3
Paralysis/CP	2.4	Fractures	7.2
Cardiovascular	8.8	Wounds, Burns	4.1
Stroke	3.8	Compl. of Surgery	3.5
Respiratory	5.4	Other Conditions	15.6

**REVENUE**

Billings	\$ 4,727,517
Disallowances	1,207,444
Collections	3,520,073
Other	0
Total	3,520,073

**EXPENSES**

Total	\$ 3,499,204
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	4.0
Registered Nurses	5.6
Licensed Practical Nurses	8.9
Home Health Aides	11.8
Physical Therapists	1.5
Occupational Therapists	0.6
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.2
Other Staff	5.0
TOTAL FTES	38.7

**LS Professional Comfort Homes, Inc.**

14665 West Lisbon Road, Suite 1B

Brookfield WI 53005

Waukesha County

**COUNTIES SERVED**

Milwaukee

Waukesha

(262) 781-0448

License Number: 1022

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 98

**TOTAL NUMBER OF ADMISSIONS** 91**PERCENT ADMISSIONS FROM:**

Private Residences	14.3%
General Hospitals	54.9
Nursing Homes	23.1
Other	7.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 69

**PERCENT DISCHARGES TO:**

Private Residences	65.2%
General Hospitals	18.8
Nursing Homes	8.7
Deaths	5.8
Other	1.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	87	3,209	36.9
Home Health Aide	44	2,521	57.3
Physical Therapy	17	246	14.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	35	2,839	81.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,815	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 54.1%
4 to 34 9.2	Medicaid 41.8
35 to 54 26.5	Other Federal 0.0
55 to 64 18.4	State Funds 1.0
65 to 74 17.3	Private Insurance 1.0
75 to 84 21.4	Self Pay 0.0
85 & over 7.1	Other 2.0
	TOTAL PATIENTS 98

Males 52.0% Females 48.0 %

PRIMARY DIAGNOSIS			
Infectious Disorders	2.0%	Digestive Disorders	1.0%
Cancer	2.0	Genitourinary Sys.	4.1
Diabetes	5.1	Preg. & Childbirth	0.0
Diseases of Blood	1.0	Arthropathies	1.0
Dementia/Alzheimers	0.0	Osteopathies	2.0
Psychoses/Neuroses	3.1	Perinatal Period	0.0
Central Nervous Sys.	2.0	Ill-Defined Cond.	10.2
Paralysis/CP	6.1	Fractures	2.0
Cardiovascular	1.0	Wounds, Burns	13.3
Stroke	1.0	Compl. of Surgery	4.1
Respiratory	3.1	Other Conditions	35.7

REVENUE	
Billings	\$ 1,033,728
Disallowances	132,647
Collections	901,081
Other	0
Total	901,081

EXPENSES	
Total	\$ 949,665

**STAFFING FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.2
Licensed Practical Nurses	2.0
Home Health Aides	11.3
Physical Therapists	0.3
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	8.9
Homemakers	0.0
Other Staff	3.9
TOTAL FTES	28.7



**Universal Pediatric Services, Inc.**  
 17100 West Bluemound Road, Suite 200  
 Brookfield WI 53005 Waukesha County

**COUNTIES SERVED**  
 Kenosha  
 Milwaukee  
 Waukesha

**Page: 119**

(262) 782-8292

License Number: 1009  
 Ownership of Agency: Proprietary Corporation  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? Yes  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 43

**TOTAL NUMBER OF ADMISSIONS** 25

**PERCENT ADMISSIONS FROM:**

Private Residences	20.0%
General Hospitals	4.0
Nursing Homes	0.0
Other	76.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 9

**PERCENT DISCHARGES TO:**

Private Residences	88.9%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	11.1
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	43	152	3.5
Home Health Aide	3	837	279.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	18	1,506	83.7
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,495	XXXXX

**AGE AND SEX OF PATIENTS PATIENT REIMBURSEMENT SOURCE**

Under 4	67.4%	Medicare	0.0%
4 to 34	32.6	Medicaid	95.3
35 to 54	0.0	Other Federal	0.0
55 to 64	0.0	State Funds	0.0
65 to 74	0.0	Private Insurance	2.3
75 to 84	0.0	Self Pay	2.3
85 & over	0.0	Other	0.0
		TOTAL PATIENTS	43
Males 51.2%	Females 48.8 %		

**PRIMARY DIAGNOSIS**

Infectious Disorders	0.0%	Digestive Disorders	0.0%
Cancer	0.0	Genitourinary Sys.	0.0
Diabetes	0.0	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	0.0
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.0	Perinatal Period	62.8
Central Nervous Sys.	2.3	Ill-Defined Cond.	2.3
Paralysis/CP	9.3	Fractures	0.0
Cardiovascular	0.0	Wounds, Burns	0.0
Stroke	0.0	Compl. of Surgery	0.0
Respiratory	9.3	Other Conditions	14.0

**REVENUE**

Billings \$	706,016
Disallowances	218,099
Collections	487,917
Other	0
Total	487,917

**EXPENSES**

Total \$	608,967
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.4
Registered Nurses	3.8
Licensed Practical Nurses	0.3
Home Health Aides	3.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	10.0

**Prohealth Home Care, Inc.**

1020 James Drive, Suite E  
Hartland WI 53029

Waukesha County

(262) 928-7444

License Number: 170

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 2,823

**COUNTIES SERVED**

Dodge  
Jefferson  
Milwaukee  
Ozaukee  
Racine  
Vilas  
Washington  
Waukesha

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**TOTAL NUMBER OF ADMISSIONS** 2,603

**PERCENT ADMISSIONS FROM:**

Private Residences	17.6%
General Hospitals	74.1
Nursing Homes	5.1
Other	3.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 2,636

**PERCENT DISCHARGES TO:**

Private Residences	79.4%
General Hospitals	16.3
Nursing Homes	1.1
Deaths	1.1
Other	2.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2,823	14,868	5.3
Home Health Aide	234	4,673	20.0
Physical Therapy	1,023	5,168	5.1
Spch/Occ/Resp Therapy	526	2,192	4.2
Medical Social Service	245	259	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	447	8,209	18.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	88	2,949	33.5
TOTAL	XXXXXXX	38,318	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.2%	Medicare 52.2%
4 to 34 15.8	Medicaid 3.2
35 to 54 10.7	Other Federal 0.7
55 to 64 8.6	State Funds 0.0
65 to 74 13.2	Private Insurance 40.5
75 to 84 25.2	Self Pay 0.1
85 & over 18.2	Other 3.3
	TOTAL PATIENTS 2,853

Males 31.4% Females 68.6 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 0.5%	Digestive Disorders 3.5%
Cancer 9.5	Genitourinary Sys. 5.2
Diabetes 2.7	Preg. & Childbirth 0.0
Diseases of Blood 0.2	Arthropathies 6.9
Dementia/Alzheimers 0.1	Osteopathies 1.3
Psychoses/Neuroses 0.4	Perinatal Period 4.2
Central Nervous Sys. 1.6	Ill-Defined Cond. 9.9
Paralysis/CP 0.1	Fractures 4.8
Cardiovascular 12.1	Wounds, Burns 3.7
Stroke 2.5	Compl. of Surgery 0.5
Respiratory 5.5	Other Conditions 24.7

**REVENUE**

Billings \$	3,355,563
Disallowances	513,071
Collections	2,842,492
Other	29,185
Total	2,871,677

**EXPENSES**

Total \$	2,831,073
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	24.2
Licensed Practical Nurses	0.6
Home Health Aides	9.2
Physical Therapists	4.3
Occupational Therapists	1.4
Speech Pathologists	0.5
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	1.0
Personal Care Workers	0.0
Homemakers	2.8
Other Staff	12.9
TOTAL FTES	59.5

**Hannah Home Health Care, Inc.**

318 North Rochester Street

Mukwonago WI 53149

Waukesha County

(262) 363-2500

**COUNTIES SERVED**

Jefferson

Milwaukee

Racine

Walworth

Waukesha

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License Number: 240

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 133

**TOTAL NUMBER OF ADMISSIONS** 82**PERCENT ADMISSIONS FROM:**

Private Residences	34.1%
General Hospitals	48.8
Nursing Homes	7.3
Other	9.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 70

**PERCENT DISCHARGES TO:**

Private Residences	58.6%
General Hospitals	11.4
Nursing Homes	7.1
Deaths	0.0
Other	22.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	132	3,361	25.5
Home Health Aide	99	13,731	138.7
Physical Therapy	32	227	7.1
Spch/Occ/Resp Therapy	23	110	4.8
Medical Social Service	0	0	0.0
Private Duty Nursing	1	19	19.0
Personal Care/PC RN Supv.	36	3,369	93.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	20,817	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 40.4%
4 to 34 15.8	Medicaid 42.8
35 to 54 27.8	Other Federal 0.0
55 to 64 6.0	State Funds 0.0
65 to 74 17.3	Private Insurance 9.6
75 to 84 20.3	Self Pay 4.2
85 & over 12.0	Other 3.0
	TOTAL PATIENTS 166

Males 42.9% Females 57.1 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 1.5%
Cancer 3.0	Genitourinary Sys. 3.0
Diabetes 3.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 5.3
Dementia/Alzheimers 3.0	Osteopathies 0.0
Psychoses/Neuroses 3.0	Perinatal Period 0.0
Central Nervous Sys. 20.3	Ill-Defined Cond. 5.3
Paralysis/CP 13.5	Fractures 5.3
Cardiovascular 8.3	Wounds, Burns 2.3
Stroke 3.0	Compl. of Surgery 0.0
Respiratory 2.3	Other Conditions 18.0

**REVENUE**

Billings \$	1,259,063
Disallowances	293,518
Collections	965,545
Other	4,946
Total	970,491

**EXPENSES**

Total \$	899,667
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.6
Licensed Practical Nurses	0.8
Home Health Aides	10.2
Physical Therapists	0.2
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.5
Homemakers	0.0
Other Staff	4.6
TOTAL FTES	18.9

**Coram Alternate Site Services, Inc.**

17012 West Victor Road

New Berlin WI 53151

Waukesha County

(262) 785-9318

License Number: 247

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 167

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	167	1,552	9.3
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,552	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.8%	Medicare 0.0%
4 to 34 26.9	Medicaid 0.0
35 to 54 32.9	Other Federal 0.0
55 to 64 23.4	State Funds 0.0
65 to 74 9.6	Private Insurance 96.4
75 to 84 2.4	Self Pay 0.0
85 & over 0.0	Other 3.6
	TOTAL PATIENTS 167

Males 53.3% Females 46.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 9.0%	Digestive Disorders 7.2%
Cancer 18.6	Genitourinary Sys. 2.4
Diabetes 0.6	Preg. & Childbirth 0.0
Diseases of Blood 7.8	Arthropathies 3.6
Dementia/Alzheimers 0.0	Osteopathies 3.0
Psychoses/Neuroses 0.0	Perinatal Period 1.2
Central Nervous Sys. 6.0	Ill-Defined Cond. 1.2
Paralysis/CP 0.0	Fractures 0.6
Cardiovascular 3.6	Wounds, Burns 4.2
Stroke 0.0	Compl. of Surgery 6.6
Respiratory 2.4	Other Conditions 22.2

**COUNTIES SERVED**

Brown  
Calumet  
Dane  
Dodge  
Fond du Lac  
Jefferson  
Kenosha  
LaFayette  
Lincoln  
Marathon  
Marinette  
Milwaukee  
Oconto  
Ozaukee  
Racine  
Rock  
Shawano  
Sheboygan  
Walworth  
Washington  
Waukesha  
Winnebago  
Wood

**TOTAL NUMBER OF ADMISSIONS** 154**PERCENT ADMISSIONS FROM:**

Private Residences	27.3%
General Hospitals	70.1
Nursing Homes	1.9
Other	0.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 155

**PERCENT DISCHARGES TO:**

Private Residences	88.4%
General Hospitals	3.9
Nursing Homes	0.0
Deaths	2.6
Other	5.2

**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	2.2
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.4
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	4.4

**REVENUE**

Billings \$	341,459
Disallowances	197,677
Collections	143,782
Other	0
Total	143,782

**EXPENSES**

Total \$	294,610
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**Oconomowoc Home Health Care, LLC**

1746 Executive Drive

Oconomowoc WI 53066

Waukesha County

**COUNTIES SERVED**

Jefferson

Milwaukee

Waukesha

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(262) 569-5520

License Number: 1025

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 12

**TOTAL NUMBER OF ADMISSIONS** 12**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	8.3
Nursing Homes	8.3
Other	83.3

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 7

**PERCENT DISCHARGES TO:**

Private Residences	0.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	100.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	12	221	18.4
Home Health Aide	3	160	53.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	381	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 25.0	Medicaid 100.0
35 to 54 66.7	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 8.3	Private Insurance 0.0
75 to 84 0.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 1

Males 58.3% Females 41.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 16.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 33.3	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 16.7	Fractures 8.3
Cardiovascular 0.0	Wounds, Burns 25.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 0.0

**REVENUE**

Billings \$	1,515
Disallowances	0
Collections	1,515
Other	0
Total	1,515

**EXPENSES**

Total \$	80,934
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.4
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	1.6

**Lutheran Social Services Home Care**

N555A W226 Eastmound Drive

Waukesha WI 53186

Waukesha County

**COUNTIES SERVED**

Jefferson

Milwaukee

Racine

Walworth

Waukesha

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(262) 896-3444

License Number: 220

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 199

**TOTAL NUMBER OF ADMISSIONS** 36**PERCENT ADMISSIONS FROM:**

Private Residences	75.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	25.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 39

**PERCENT DISCHARGES TO:**

Private Residences	82.1%
General Hospitals	2.6
Nursing Homes	0.0
Deaths	5.1
Other	10.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	118	4,079	34.6
Home Health Aide	27	5,191	192.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	290	162,047	558.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	171,317	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 2.4%
4 to 34 35.2	Medicaid 91.2
35 to 54 40.7	Other Federal 0.0
55 to 64 11.1	State Funds 0.0
65 to 74 5.0	Private Insurance 2.0
75 to 84 5.0	Self Pay 2.4
85 & over 3.0	Other 2.0
	TOTAL PATIENTS 205

Males 49.7% Females 50.3 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 0.0%		
Cancer 1.0	Genitourinary Sys. 0.0		
Diabetes 2.5	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 4.0		
Dementia/Alzheimers 0.0	Osteopathies 0.5		
Psychoses/Neuroses 13.1	Perinatal Period 0.0		
Central Nervous Sys. 7.5	Ill-Defined Cond. 0.5		
Paralysis/CP 18.6	Fractures 1.0		
Cardiovascular 2.5	Wounds, Burns 3.0		
Stroke 3.0	Compl. of Surgery 1.0		
Respiratory 0.5	Other Conditions 41.2		

REVENUE	
Billings \$	2,681,712
Disallowances	0
Collections	2,681,712
Other	18,372
Total	2,700,084

EXPENSES	
Total \$	1,999,052

STAFFING	FTES
Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	3.4
Licensed Practical Nurses	0.2
Home Health Aides	29.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	125.0
Homemakers	0.0
Other Staff	5.6
TOTAL FTES	166.4

**St. Joseph Home Care**

101 East Beckert Road, #101  
New London WI 54961

Waupaca County

**COUNTIES SERVED**

Outagamie  
Waupaca

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(920) 982-5354

License Number: 300

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 16

**TOTAL NUMBER OF ADMISSIONS** 15

**PERCENT ADMISSIONS FROM:**

Private Residences	73.3%
General Hospitals	13.3
Nursing Homes	13.3
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 11

**PERCENT DISCHARGES TO:**

Private Residences	36.4%
General Hospitals	18.2
Nursing Homes	18.2
Deaths	0.0
Other	27.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	16	123	7.7
Home Health Aide	15	1,112	74.1
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,235	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 34 0.0	Medicaid 0.0
35 to 54 6.3	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 6.3	Private Insurance 12.5
75 to 84 31.3	Self Pay 87.5
85 & over 56.3	Other 0.0
	TOTAL PATIENTS 16

Males 18.8% Females 81.3 %

PRIMARY DIAGNOSIS			
Infectious Disorders 6.3%	Digestive Disorders 0.0%		
Cancer 6.3	Genitourinary Sys. 6.3		
Diabetes 0.0	Preg. & Childbirth 0.0		
Diseases of Blood 6.3	Arthropathies 0.0		
Dementia/Alzheimers 37.5	Osteopathies 12.5		
Psychoses/Neuroses 0.0	Perinatal Period 0.0		
Central Nervous Sys. 6.3	Ill-Defined Cond. 0.0		
Paralysis/CP 0.0	Fractures 0.0		
Cardiovascular 12.5	Wounds, Burns 0.0		
Stroke 6.3	Compl. of Surgery 0.0		
Respiratory 0.0	Other Conditions 0.0		

**REVENUE**

Billings \$	28,905
Disallowances	0
Collections	28,905
Other	0
Total	28,905

**EXPENSES**

Total \$	30,544
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**STAFFING****FTES**

Administrators	0.9
Reg. Nurse Supervisors	0.0
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTES	1.3

**REM Health of Wisconsin, Inc**

112 South Main Street, Suite 2

Waupaca WI 54981

Waupaca County

(715) 258-2130

License Number: 24

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 53

**COUNTIES SERVED**

Brown

Outagamie

Portage

Shawano

Waupaca

Waushara

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**TOTAL NUMBER OF ADMISSIONS** 29**PERCENT ADMISSIONS FROM:**

Private Residences 13.8%

General Hospitals 72.4

Nursing Homes 6.9

Other 6.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 40

**PERCENT DISCHARGES TO:**

Private Residences 52.5%

General Hospitals 12.5

Nursing Homes 10.0

Deaths 12.5

Other 12.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	53	634	12.0
Home Health Aide	5	376	75.2
Physical Therapy	5	42	8.4
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	2	1,070	535.0
Personal Care/PC RN Supv.	42	13,742	327.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	15,864	XXXXX

**AGE AND SEX OF PATIENTS**

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.7%	Medicare 23.5%
4 to 34 18.9	Medicaid 41.2
35 to 54 22.6	Other Federal 0.0
55 to 64 9.4	State Funds 1.5
65 to 74 18.9	Private Insurance 17.6
75 to 84 20.8	Self Pay 16.2
85 & over 3.8	Other 0.0
	TOTAL PATIENTS 68

Males 56.6% Females 43.4 %

**PRIMARY DIAGNOSIS**

PRIMARY DIAGNOSIS	
Infectious Disorders 1.9%	Digestive Disorders 1.9%
Cancer 3.8	Genitourinary Sys. 3.8
Diabetes 1.9	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 0.0
Dementia/Alzheimers 1.9	Osteopathies 1.9
Psychoses/Neuroses 0.0	Perinatal Period 1.9
Central Nervous Sys. 1.9	Ill-Defined Cond. 0.0
Paralysis/CP 9.4	Fractures 3.8
Cardiovascular 22.6	Wounds, Burns 5.7
Stroke 1.9	Compl. of Surgery 11.3
Respiratory 7.5	Other Conditions 15.1

**REVENUE**

Billings \$	750,279
Disallowances	384,897
Collections	365,382
Other	0
Total	365,382

**EXPENSES**

Total \$	590,209
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**STAFFING****FTEs**

Administrators	0.3
Reg. Nurse Supervisors	1.5
Registered Nurses	1.4
Licensed Practical Nurses	2.4
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.1
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	10.6



**Preferred Home Health Care, Inc.**

1476 Kenwood Drive  
Menasha WI 54952

Winnebago County

**COUNTIES SERVED**

Outagamie  
Winnebago

(920) 725-1116

License Number: 157

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 235

**TOTAL NUMBER OF ADMISSIONS** 73

**PERCENT ADMISSIONS FROM:**

Private Residences	63.0%
General Hospitals	13.7
Nursing Homes	19.2
Other	4.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 83

**PERCENT DISCHARGES TO:**

Private Residences	49.4%
General Hospitals	33.7
Nursing Homes	8.4
Deaths	0.0
Other	8.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	53	1,683	31.8
Home Health Aide	130	15,914	122.4
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	7	1,143	163.3
Personal Care/PC RN Supv.	152	12,249	80.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	65	2,286	35.2
TOTAL	XXXXXXX	33,275	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 3.0%
4 to 34 6.8	Medicaid 51.3
35 to 54 15.7	Other Federal 0.0
55 to 64 12.8	State Funds 0.0
65 to 74 20.0	Private Insurance 4.7
75 to 84 29.8	Self Pay 22.0
85 & over 14.0	Other 19.0
	TOTAL PATIENTS 300

Males 40.4% Females 59.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 1.3%
Cancer 2.1	Genitourinary Sys. 1.7
Diabetes 14.5	Preg. & Childbirth 0.0
Diseases of Blood 0.4	Arthropathies 9.4
Dementia/Alzheimers 5.1	Osteopathies 6.8
Psychoses/Neuroses 0.9	Perinatal Period 0.0
Central Nervous Sys. 8.9	Ill-Defined Cond. 3.8
Paralysis/CP 11.1	Fractures 0.0
Cardiovascular 6.4	Wounds, Burns 6.4
Stroke 9.4	Compl. of Surgery 1.3
Respiratory 5.1	Other Conditions 5.5

**REVENUE**

Billings \$	1,733,287
Disallowances	308,812
Collections	1,424,475
Other	1,939
Total	1,426,414

**EXPENSES**

Total \$	1,428,625
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	4.0
Registered Nurses	5.1
Licensed Practical Nurses	0.5
Home Health Aides	21.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	2.8
Other Staff	4.0
TOTAL FTES	39.0

**Thedacare at Home**

201 East Bell Street  
Neenah WI 54957

Winnebago County

(920) 969-0919

License Number: 88

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 1,448

**COUNTIES SERVED**

Brown  
Calumet  
Fond du Lac  
Manitowoc  
Outagamie  
Portage  
Shawano  
Waupaca  
Waushara  
Winnebago

**TOTAL NUMBER OF ADMISSIONS** 1,421

**PERCENT ADMISSIONS FROM:**

Private Residences	21.9%
General Hospitals	69.9
Nursing Homes	7.0
Other	1.2

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,409

**PERCENT DISCHARGES TO:**

Private Residences	86.6%
General Hospitals	1.9
Nursing Homes	4.0
Deaths	3.0
Other	4.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,128	13,417	11.9
Home Health Aide	153	2,900	19.0
Physical Therapy	609	4,391	7.2
Spch/Occ/Resp Therapy	327	1,155	3.5
Medical Social Service	77	92	1.2
Private Duty Nursing	1	111	111.0
Personal Care/PC RN Supv.	18	673	37.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	22,739	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.3%	Medicare 70.9%
4 to 34 5.7	Medicaid 4.8
35 to 54 12.5	Other Federal 0.0
55 to 64 10.6	State Funds 0.0
65 to 74 16.5	Private Insurance 24.0
75 to 84 29.4	Self Pay 0.3
85 & over 23.1	Other 0.0
	TOTAL PATIENTS 1,448

Males 44.4% Females 55.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.1%	Digestive Disorders 6.1%
Cancer 11.2	Genitourinary Sys. 3.0
Diabetes 2.8	Preg. & Childbirth 0.3
Diseases of Blood 0.6	Arthropathies 8.4
Dementia/Alzheimers 0.3	Osteopathies 0.9
Psychoses/Neuroses 0.1	Perinatal Period 0.8
Central Nervous Sys. 2.8	Ill-Defined Cond. 5.7
Paralysis/CP 0.4	Fractures 5.0
Cardiovascular 17.8	Wounds, Burns 2.8
Stroke 1.9	Compl. of Surgery 4.8
Respiratory 8.8	Other Conditions 14.4

**REVENUE**

Billings \$	3,339,013
Disallowances	126,537
Collections	3,212,476
Other	265
Total	3,212,741

**EXPENSES**

Total \$	3,162,307
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	24.3
Licensed Practical Nurses	1.5
Home Health Aides	7.0
Physical Therapists	7.0
Occupational Therapists	1.4
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	2.9
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	16.0
TOTAL FTES	62.1

**Affinity Visiting Nurses**

515 South Washburn, Suite 206

Oshkosh WI 54904

Winnebago County

(920) 236-8500

License Number: 144

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 831

**COUNTIES SERVED**

Brown

Calumet

Fond du Lac

Manitowoc

Outagamie

Shawano

Waupaca

Winnebago

**TOTAL NUMBER OF ADMISSIONS** 848**PERCENT ADMISSIONS FROM:**

Private Residences 21.9%

General Hospitals 71.7

Nursing Homes 4.7

Other 1.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 842

**PERCENT DISCHARGES TO:**

Private Residences 75.1%

General Hospitals 4.8

Nursing Homes 5.1

Deaths 3.0

Other 12.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	717	8,153	11.4
Home Health Aide	146	2,846	19.5
Physical Therapy	393	2,462	6.3
Spch/Occ/Resp Therapy	218	752	3.4
Medical Social Service	128	192	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	6	14	2.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,419	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 74.1%
4 to 34 3.6	Medicaid 4.9
35 to 54 11.8	Other Federal 0.0
55 to 64 10.5	State Funds 0.0
65 to 74 18.1	Private Insurance 19.6
75 to 84 33.0	Self Pay 1.1
85 & over 22.6	Other 0.2
	TOTAL PATIENTS 831

Males 44.4% Females 55.6 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.2%	Digestive Disorders 6.4%
Cancer 8.5	Genitourinary Sys. 3.2
Diabetes 2.9	Preg. & Childbirth 0.1
Diseases of Blood 0.5	Arthropathies 9.5
Dementia/Alzheimers 0.2	Osteopathies 1.3
Psychoses/Neuroses 0.1	Perinatal Period 0.2
Central Nervous Sys. 0.6	Ill-Defined Cond. 9.4
Paralysis/CP 0.0	Fractures 4.0
Cardiovascular 12.9	Wounds, Burns 1.1
Stroke 3.1	Compl. of Surgery 4.9
Respiratory 5.7	Other Conditions 25.0

**REVENUE**

Billings \$	1,895,732
Disallowances	257,163
Collections	1,638,569
Other	1,090
Total	1,639,659

**EXPENSES**

Total \$	2,137,875
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	11.3
Licensed Practical Nurses	2.8
Home Health Aides	4.4
Physical Therapists	2.2
Occupational Therapists	0.8
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	0.0
Personal Care Workers	0.3
Homemakers	0.0
Other Staff	3.8
TOTAL FTES	28.1

**Clarity Care, Inc.**

424 Washington Avenue  
Oshkosh WI 54901

Winnebago County

(920) 236-6567

License Number: 214

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 471

**COUNTIES SERVED**

Brown  
Calumet  
Fond du Lac  
Oconto  
Outagamie  
Waupaca  
Waushara  
Winnebago

**TOTAL NUMBER OF ADMISSIONS** 168

**PERCENT ADMISSIONS FROM:**

Private Residences	38.1%
General Hospitals	3.0
Nursing Homes	4.2
Other	54.8

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 105

**PERCENT DISCHARGES TO:**

Private Residences	67.6%
General Hospitals	5.7
Nursing Homes	3.8
Deaths	5.7
Other	17.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	195	4,793	24.6
Home Health Aide	32	8,854	276.7
Physical Therapy	17	200	11.8
Spch/Occ/Resp Therapy	13	205	15.8
Medical Social Service	0	0	0.0
Private Duty Nursing	1	2	2.0
Personal Care/PC RN Supv.	545	178,548	327.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	136	23,424	172.2
TOTAL	XXXXXXX	216,026	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 6.4%
4 to 34 17.0	Medicaid 65.2
35 to 54 39.9	Other Federal 0.0
55 to 64 12.5	State Funds 0.0
65 to 74 8.1	Private Insurance 1.8
75 to 84 10.6	Self Pay 2.9
85 & over 11.9	Other 23.6
	TOTAL PATIENTS 512

Males 47.6% Females 52.4 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.5%	Digestive Disorders 0.4%
Cancer 0.8	Genitourinary Sys. 0.4
Diabetes 8.5	Preg. & Childbirth 0.2
Diseases of Blood 1.9	Arthropathies 6.6
Dementia/Alzheimers 1.9	Osteopathies 0.4
Psychoses/Neuroses 6.2	Perinatal Period 0.0
Central Nervous Sys. 4.5	Ill-Defined Cond. 6.4
Paralysis/CP 13.0	Fractures 2.5
Cardiovascular 4.2	Wounds, Burns 2.1
Stroke 3.2	Compl. of Surgery 0.0
Respiratory 2.5	Other Conditions 32.7

**REVENUE**

Billings \$	5,421,167
Disallowances	1,319,062
Collections	4,102,105
Other	605,834
Total	4,707,939

**EXPENSES**

Total \$	4,457,863
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	5.6
Licensed Practical Nurses	2.3
Home Health Aides	12.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	24.4
Homemakers	11.4
Other Staff	4.0
TOTAL FTES	63.0

**Homemakers Inc. of Oshkosh**

2020 West 9th Avenue, Box 2128

Oshkosh WI 54904

Winnebago County

(920) 233-2081

License Number: 17

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 597

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	177	5,278	29.8
Home Health Aide	134	22,135	165.2
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	4	761	190.3
Medical Social Service	0	0	0.0
Private Duty Nursing	19	2,889	152.1
Personal Care/PC RN Supv.	764	137,146	179.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	5	2.5
TOTAL	XXXXXXX	168,214	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 1.4%
4 to 34 20.4	Medicaid 79.1
35 to 54 27.6	Other Federal 0.0
55 to 64 10.6	State Funds 0.8
65 to 74 18.6	Private Insurance 8.9
75 to 84 15.7	Self Pay 9.6
85 & over 5.7	Other 0.2
	TOTAL PATIENTS 626

Males 44.6% Females 55.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 1.2%
Cancer 0.8	Genitourinary Sys. 0.5
Diabetes 6.4	Preg. & Childbirth 0.3
Diseases of Blood 0.5	Arthropathies 6.9
Dementia/Alzheimers 4.0	Osteopathies 5.0
Psychoses/Neuroses 2.5	Perinatal Period 0.2
Central Nervous Sys. 15.9	Ill-Defined Cond. 1.0
Paralysis/CP 11.7	Fractures 2.2
Cardiovascular 7.7	Wounds, Burns 1.2
Stroke 6.4	Compl. of Surgery 0.0
Respiratory 6.0	Other Conditions 19.6

**COUNTIES SERVED**

Brown  
Calumet  
Dodge  
Door  
Fond du Lac  
Green Lake  
Jefferson  
Kewaunee  
Manitowoc  
Marathon  
Oconto  
Outagamie  
Portage  
Shawano  
Sheboygan  
Washington  
Waushara  
Winnebago  
Wood

**TOTAL NUMBER OF ADMISSIONS** 258**PERCENT ADMISSIONS FROM:**

Private Residences 77.1%  
General Hospitals 6.2  
Nursing Homes 0.0  
Other 16.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 165

**PERCENT DISCHARGES TO:**

Private Residences 69.1%  
General Hospitals 0.0  
Nursing Homes 15.8  
Deaths 10.9  
Other 4.2

**STAFFING****FTES**

Administrators 0.4  
Reg. Nurse Supervisors 12.4  
Registered Nurses 6.3  
Licensed Practical Nurses 10.7  
Home Health Aides 21.0  
Physical Therapists 0.0  
Occupational Therapists 0.0  
Speech Pathologists 0.0  
Respiratory Therapists 0.0  
Medical Social Workers 0.0  
Other Therapeutic Staff 0.0  
Personal Care Workers 32.9  
Homemakers 14.2  
Other Staff 13.0  
TOTAL FTES 110.8

**REVENUE**

Billings \$ 7,526,596  
Disallowances 1,608,316  
Collections 5,918,280  
Other 0  
Total 5,918,280

**EXPENSES**

Total \$ 5,817,330

**Ministry Home Care Home Health - Marshfield**

303 West Upham, Suite 208

Marshfield WI 54449

Wood County

(715) 387-9685

License Number: 182

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 1,294

**COUNTIES SERVED**

Chippewa

Clark

Lincoln

Marathon

Portage

Price

Sawyer

Taylor

Waupaca

Waushara

Wood

**TOTAL NUMBER OF ADMISSIONS** 1,186**PERCENT ADMISSIONS FROM:**

Private Residences	1.6%
General Hospitals	78.0
Nursing Homes	6.8
Other	13.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 1,235

**PERCENT DISCHARGES TO:**

Private Residences	77.8%
General Hospitals	4.1
Nursing Homes	4.9
Deaths	2.4
Other	10.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,182	14,658	12.4
Home Health Aide	315	4,931	15.7
Physical Therapy	426	3,676	8.6
Spch/Occ/Resp Therapy	237	1,438	6.1
Medical Social Service	94	156	1.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	36	1,085	30.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	25,944	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.4%	Medicare 80.8%
4 to 34 2.7	Medicaid 6.7
35 to 54 7.0	Other Federal 0.0
55 to 64 8.2	State Funds 0.5
65 to 74 16.9	Private Insurance 11.0
75 to 84 33.8	Self Pay 0.9
85 & over 28.9	Other 0.2
	TOTAL PATIENTS 1,294

Males 40.0% Females 60.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.9%	Digestive Disorders 4.6%
Cancer 5.8	Genitourinary Sys. 2.3
Diabetes 3.1	Preg. & Childbirth 0.4
Diseases of Blood 0.9	Arthropathies 11.7
Dementia/Alzheimers 0.5	Osteopathies 2.1
Psychoses/Neuroses 3.5	Perinatal Period 0.2
Central Nervous Sys. 1.5	Ill-Defined Cond. 4.1
Paralysis/CP 0.5	Fractures 4.3
Cardiovascular 19.2	Wounds, Burns 2.6
Stroke 2.0	Compl. of Surgery 5.3
Respiratory 5.4	Other Conditions 19.1

**REVENUE**

Billings \$	3,498,236
Disallowances	581,843
Collections	2,916,393
Other	14,422
Total	2,930,815

**EXPENSES**

Total \$	3,361,674
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	3.0
Registered Nurses	15.2
Licensed Practical Nurses	0.2
Home Health Aides	6.9
Physical Therapists	2.0
Occupational Therapists	1.2
Speech Pathologists	0.6
Respiratory Therapists	0.0
Medical Social Workers	0.8
Other Therapeutic Staff	0.6
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.7
TOTAL FTES	36.1

**Mercy Home Care - Dubuque**

250 Mercy Drive  
Dubuque IA 52001

Out of State

**COUNTIES SERVED**

Grant  
LaFayette

(563) 589-8118

License Number: 197

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 120

**TOTAL NUMBER OF ADMISSIONS** 116

**PERCENT ADMISSIONS FROM:**

Private Residences	1.7%
General Hospitals	97.4
Nursing Homes	0.9
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 121

**PERCENT DISCHARGES TO:**

Private Residences	94.2%
General Hospitals	0.0
Nursing Homes	2.5
Deaths	1.7
Other	1.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	120	898	7.5
Home Health Aide	16	141	8.8
Physical Therapy	63	321	5.1
Spch/Occ/Resp Therapy	20	62	3.1
Medical Social Service	6	7	1.2
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,429	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 70.2%
4 to 34 4.2	Medicaid 0.0
35 to 54 7.5	Other Federal 0.0
55 to 64 15.0	State Funds 0.0
65 to 74 24.2	Private Insurance 29.8
75 to 84 31.7	Self Pay 0.0
85 & over 17.5	Other 0.0
	TOTAL PATIENTS 121

Males 60.0% Females 40.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.8%	Digestive Disorders 5.8%
Cancer 7.5	Genitourinary Sys. 0.0
Diabetes 3.3	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 20.0
Dementia/Alzheimers 0.0	Osteopathies 1.7
Psychoses/Neuroses 2.5	Perinatal Period 0.0
Central Nervous Sys. 0.8	Ill-Defined Cond. 4.2
Paralysis/CP 0.0	Fractures 8.3
Cardiovascular 11.7	Wounds, Burns 3.3
Stroke 4.2	Compl. of Surgery 2.5
Respiratory 6.7	Other Conditions 15.0

**REVENUE**

Billings \$	213,069
Disallowances	35,735
Collections	177,334
Other	0
Total	177,334

**EXPENSES**

Total \$	90,593
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	0.1
Registered Nurses	0.5
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.5
TOTAL FTES	1.4

**Interim Healthcare - Lake Superior**

4418 Haines Road, Suite 700

Duluth MN 55811

Out of State

**COUNTIES SERVED**

Douglas

(218) 722-0053

License Number: 284

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 47

**TOTAL NUMBER OF ADMISSIONS** 39**PERCENT ADMISSIONS FROM:**

Private Residences	84.6%
General Hospitals	10.3
Nursing Homes	2.6
Other	2.6

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 17

**PERCENT DISCHARGES TO:**

Private Residences	52.9%
General Hospitals	17.6
Nursing Homes	17.6
Deaths	5.9
Other	5.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	39	777	19.9
Home Health Aide	3	69	23.0
Physical Therapy	7	65	9.3
Spch/Occ/Resp Therapy	2	10	5.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	12	616	51.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	20	10.0
TOTAL	XXXXXXX	1,557	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.1%	Medicare 9.6%
4 to 34 2.1	Medicaid 53.8
35 to 54 14.9	Other Federal 19.2
55 to 64 21.3	State Funds 0.0
65 to 74 14.9	Private Insurance 3.8
75 to 84 27.7	Self Pay 0.0
85 & over 17.0	Other 13.5
	TOTAL PATIENTS 52

Males 40.4% Females 59.6 %

PRIMARY DIAGNOSIS			
Infectious Disorders 0.0%	Digestive Disorders 2.1%		
Cancer 2.1	Genitourinary Sys. 2.1		
Diabetes 4.3	Preg. & Childbirth 0.0		
Diseases of Blood 0.0	Arthropathies 6.4		
Dementia/Alzheimers 0.0	Osteopathies 0.0		
Psychoses/Neuroses 21.3	Perinatal Period 0.0		
Central Nervous Sys. 6.4	Ill-Defined Cond. 2.1		
Paralysis/CP 0.0	Fractures 0.0		
Cardiovascular 17.0	Wounds, Burns 2.1		
Stroke 2.1	Compl. of Surgery 0.0		
Respiratory 4.3	Other Conditions 27.7		

REVENUE		
Billings \$	105,776	
Disallowances	7,899	
Collections	97,877	
Other	0	
Total	97,877	

EXPENSES		
Total \$	97,514	

STAFFING	FTES
Administrators	0.1
Reg. Nurse Supervisors	0.4
Registered Nurses	0.5
Licensed Practical Nurses	0.1
Home Health Aides	0.0
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.8
Homemakers	0.0
Other Staff	0.1
TOTAL FTES	3.0



**St. Luke's Home Health Service**

220 North 6th Avenue East  
Duluth MN 55805

Out of State

**COUNTIES SERVED**

Douglas

(218) 249-6111

License Number: 169

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 60

**TOTAL NUMBER OF ADMISSIONS** 57

**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	26.3
Nursing Homes	0.0
Other	73.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 56

**PERCENT DISCHARGES TO:**

Private Residences	85.7%
General Hospitals	5.4
Nursing Homes	1.8
Deaths	1.8
Other	5.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	59	672	11.4
Home Health Aide	23	448	19.5
Physical Therapy	36	312	8.7
Spch/Occ/Resp Therapy	10	71	7.1
Medical Social Service	3	3	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,506	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.7%	Medicare 66.7%
4 to 34 3.3	Medicaid 9.5
35 to 54 5.0	Other Federal 0.0
55 to 64 26.7	State Funds 0.0
65 to 74 20.0	Private Insurance 23.8
75 to 84 36.7	Self Pay 0.0
85 & over 6.7	Other 0.0
	TOTAL PATIENTS 63

Males 40.0% Females 60.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 5.0%
Cancer 11.7	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 20.0
Dementia/Alzheimers 0.0	Osteopathies 1.7
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 5.0	Ill-Defined Cond. 8.3
Paralysis/CP 0.0	Fractures 1.7
Cardiovascular 11.7	Wounds, Burns 3.3
Stroke 0.0	Compl. of Surgery 3.3
Respiratory 8.3	Other Conditions 18.3

**REVENUE**

Billings \$	223,843
Disallowances	0
Collections	223,843
Other	0
Total	223,843

**EXPENSES**

Total \$	193,733
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**STAFFING****FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.6
Licensed Practical Nurses	0.0
Home Health Aides	0.3
Physical Therapists	0.4
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTEs	1.3

**St. Mary's Home Health**  
516 East Fourth Street  
Duluth MN 55805

Out of State

**COUNTIES SERVED**  
Douglas

(218) 786-4004

License Number: 175  
Ownership of Agency: Nonprofit Private  
Title 18 (Medicare) certified? Yes  
Title 19 (Medicaid) certified? Yes  
Affiliated with a hospital? No  
Number of unduplicated patients in 2003 = 133

**TOTAL NUMBER OF ADMISSIONS** 134

**PERCENT ADMISSIONS FROM:**

Private Residences	0.7%
General Hospitals	74.6
Nursing Homes	1.5
Other	23.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 121

**PERCENT DISCHARGES TO:**

Private Residences	89.3%
General Hospitals	5.0
Nursing Homes	0.8
Deaths	0.8
Other	4.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	123	998	8.1
Home Health Aide	12	533	44.4
Physical Therapy	33	317	9.6
Spch/Occ/Resp Therapy	11	77	7.0
Medical Social Service	2	2	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,927	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 15.8%	Medicare 31.1%
4 to 34 21.8	Medicaid 24.5
35 to 54 19.5	Other Federal 0.0
55 to 64 14.3	State Funds 0.0
65 to 74 11.3	Private Insurance 20.5
75 to 84 12.0	Self Pay 15.2
85 & over 5.3	Other 8.6
	TOTAL PATIENTS 151

Males 34.6% Females 65.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 2.3%	Digestive Disorders 4.5%
Cancer 6.0	Genitourinary Sys. 0.8
Diabetes 0.0	Preg. & Childbirth 0.8
Diseases of Blood 0.0	Arthropathies 6.0
Dementia/Alzheimers 0.0	Osteopathies 5.3
Psychoses/Neuroses 0.0	Perinatal Period 1.5
Central Nervous Sys. 2.3	Ill-Defined Cond. 2.3
Paralysis/CP 0.0	Fractures 3.8
Cardiovascular 1.5	Wounds, Burns 0.8
Stroke 0.0	Compl. of Surgery 11.3
Respiratory 6.0	Other Conditions 45.1

**REVENUE**

Billings \$	145,346
Disallowances	32,017
Collections	113,329
Other	0
Total	113,329

**EXPENSES**

Total \$	157,176
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**STAFFING**

**FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.3
Registered Nurses	8.3
Licensed Practical Nurses	1.2
Home Health Aides	3.8
Physical Therapists	4.4
Occupational Therapists	1.2
Speech Pathologists	0.8
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	1.2
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	5.4
TOTAL FTES	29.1

**Dickinson Home Health**

617 North Stephenson Avenue  
Iron Mountain MI 49801

Out of State

**COUNTIES SERVED**

Florence  
Forest  
Marinette

(906) 779-7820

License Number: 314

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 92

**TOTAL NUMBER OF ADMISSIONS** 99

**PERCENT ADMISSIONS FROM:**

Private Residences	92.9%
General Hospitals	0.0
Nursing Homes	4.0
Other	3.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 90

**PERCENT DISCHARGES TO:**

Private Residences	73.3%
General Hospitals	5.6
Nursing Homes	8.9
Deaths	2.2
Other	10.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	73	867	11.9
Home Health Aide	23	148	6.4
Physical Therapy	61	686	11.2
Spch/Occ/Resp Therapy	16	73	4.6
Medical Social Service	9	17	1.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,791	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 84.8%
4 to 34 3.3	Medicaid 4.3
35 to 54 5.4	Other Federal 0.0
55 to 64 9.8	State Funds 0.0
65 to 74 20.7	Private Insurance 10.9
75 to 84 38.0	Self Pay 0.0
85 & over 22.8	Other 0.0
	TOTAL PATIENTS 92

Males 45.7% Females 54.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.1%	Digestive Disorders 2.2%
Cancer 9.8	Genitourinary Sys. 4.3
Diabetes 3.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 14.1
Dementia/Alzheimers 0.0	Osteopathies 1.1
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 3.3	Ill-Defined Cond. 13.0
Paralysis/CP 1.1	Fractures 16.3
Cardiovascular 10.9	Wounds, Burns 7.6
Stroke 3.3	Compl. of Surgery 2.2
Respiratory 3.3	Other Conditions 3.3

**REVENUE**

Billings \$	239,677
Disallowances	-19,223
Collections	258,900
Other	0
Total	258,900

**EXPENSES**

Total \$	253,061
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.3
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	2.6
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.2
TOTAL FTES	9.0

**Dickinson - Iron District Health Department**  
 601 Washington Avenue  
 Iron River MI 49935 Out of State  
 (906) 265-9913

**COUNTIES SERVED**  
 Florence  
 Forest  
 Marinette

License Number: 53  
 Ownership of Agency: County  
 Title 18 (Medicare) certified? Yes  
 Title 19 (Medicaid) certified? No  
 Affiliated with a hospital? No  
 Number of unduplicated patients in 2003 = 20

**TOTAL NUMBER OF ADMISSIONS** 21

**PERCENT ADMISSIONS FROM:**

Private Residences	19.0%
General Hospitals	66.7
Nursing Homes	14.3
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 21

**PERCENT DISCHARGES TO:**

Private Residences	66.7%
General Hospitals	19.0
Nursing Homes	9.5
Deaths	4.8
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	19	293	15.4
Home Health Aide	10	256	25.6
Physical Therapy	8	116	14.5
Spch/Occ/Resp Therapy	5	52	10.4
Medical Social Service	1	1	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	718	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 90.0%
4 to 34 0.0	Medicaid 0.0
35 to 54 5.0	Other Federal 0.0
55 to 64 5.0	State Funds 0.0
65 to 74 25.0	Private Insurance 10.0
75 to 84 20.0	Self Pay 0.0
85 & over 45.0	Other 0.0
	TOTAL PATIENTS 20

Males 45.0% Females 55.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 5.0%
Cancer 15.0	Genitourinary Sys. 10.0
Diabetes 5.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 10.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 5.0	Ill-Defined Cond. 0.0
Paralysis/CP 5.0	Fractures 5.0
Cardiovascular 15.0	Wounds, Burns 0.0
Stroke 5.0	Compl. of Surgery 0.0
Respiratory 10.0	Other Conditions 10.0

**REVENUE**

Billings \$	67,629
Disallowances	0
Collections	67,629
Other	0
Total	67,629

**EXPENSES**

Total \$	77,144
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**STAFFING**

**FTES**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.5
Licensed Practical Nurses	0.0
Home Health Aides	0.4
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.2
TOTAL FTES	1.2

**United Home Care**

927 Riverside Plaza  
Iron River MI 49935

Out of State

**COUNTIES SERVED**

Florence  
Vilas

(906) 265-6118

License Number: 1013

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 11

**TOTAL NUMBER OF ADMISSIONS** 10

**PERCENT ADMISSIONS FROM:**

Private Residences	10.0%
General Hospitals	20.0
Nursing Homes	10.0
Other	60.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 10

**PERCENT DISCHARGES TO:**

Private Residences	70.0%
General Hospitals	10.0
Nursing Homes	0.0
Deaths	0.0
Other	20.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	11	145	13.2
Home Health Aide	4	52	13.0
Physical Therapy	5	6	1.2
Spch/Occ/Resp Therapy	1	4	4.0
Medical Social Service	1	1	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	208	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 85.7%
4 to 34 0.0	Medicaid 0.0
35 to 54 18.2	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 0.0	Private Insurance 14.3
75 to 84 36.4	Self Pay 0.0
85 & over 45.5	Other 0.0
	TOTAL PATIENTS 14

Males 72.7% Females 27.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 9.1	Genitourinary Sys. 0.0
Diabetes 9.1	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 9.1
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 18.2
Paralysis/CP 0.0	Fractures 9.1
Cardiovascular 18.2	Wounds, Burns 9.1
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 9.1	Other Conditions 9.1

**REVENUE**

Billings \$	26,844
Disallowances	1,081
Collections	25,763
Other	0
Total	25,763

**EXPENSES**

Total \$	18,670
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	0.5

**Caring Home Health**

N10567 Grandview Lane  
Ironwood MI 49938

Out of State

**COUNTIES SERVED**

Iron

(906) 932-2440

License Number: 190

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 101

**TOTAL NUMBER OF ADMISSIONS** 103

**PERCENT ADMISSIONS FROM:**

Private Residences	31.1%
General Hospitals	51.5
Nursing Homes	16.5
Other	1.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 98

**PERCENT DISCHARGES TO:**

Private Residences	86.7%
General Hospitals	8.2
Nursing Homes	4.1
Deaths	0.0
Other	1.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	99	1,418	14.3
Home Health Aide	35	647	18.5
Physical Therapy	46	379	8.2
Spch/Occ/Resp Therapy	11	92	8.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	12	1,768	147.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,304	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 81.1%
4 to 34 3.0	Medicaid 10.4
35 to 54 5.9	Other Federal 0.0
55 to 64 8.9	State Funds 0.0
65 to 74 23.8	Private Insurance 6.6
75 to 84 38.6	Self Pay 0.9
85 & over 19.8	Other 0.9
	TOTAL PATIENTS 106

Males 41.6% Females 58.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 5.9%
Cancer 5.9	Genitourinary Sys. 1.0
Diabetes 4.0	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 8.9
Dementia/Alzheimers 1.0	Osteopathies 3.0
Psychoses/Neuroses 1.0	Perinatal Period 0.0
Central Nervous Sys. 2.0	Ill-Defined Cond. 4.0
Paralysis/CP 2.0	Fractures 7.9
Cardiovascular 20.8	Wounds, Burns 1.0
Stroke 3.0	Compl. of Surgery 4.0
Respiratory 8.9	Other Conditions 14.9

**REVENUE**

Billings \$	278,081
Disallowances	17,944
Collections	260,137
Other	0
Total	260,137

**EXPENSES**

Total \$	209,300
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	2.0
Registered Nurses	1.2
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.7
TOTAL FTES	7.1

**Marquette General Home Health & Hospice**800 East Boulevard  
Kingsford MI 49802

Out of State

(906) 779-1844

**COUNTIES SERVED**Florence  
Forest  
Marinette  
Oconto

License Number: 207

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 189

**TOTAL NUMBER OF ADMISSIONS** 157**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	73.9
Nursing Homes	3.2
Other	22.9

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 146

**PERCENT DISCHARGES TO:**

Private Residences	72.6%
General Hospitals	4.1
Nursing Homes	0.0
Deaths	13.0
Other	10.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	189	3,444	18.2
Home Health Aide	49	2,140	43.7
Physical Therapy	46	462	10.0
Spch/Occ/Resp Therapy	6	54	9.0
Medical Social Service	32	80	2.5
Private Duty Nursing	1	1,158	1158
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,338	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.6%	Medicare 72.5%
4 to 34 6.9	Medicaid 5.3
35 to 54 15.3	Other Federal 0.0
55 to 64 10.1	State Funds 0.0
65 to 74 18.5	Private Insurance 22.2
75 to 84 28.6	Self Pay 0.0
85 & over 19.0	Other 0.0
	TOTAL PATIENTS 189

Males 48.7% Females 51.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.5%	Digestive Disorders 3.2%
Cancer 9.0	Genitourinary Sys. 5.3
Diabetes 6.9	Preg. & Childbirth 0.0
Diseases of Blood 2.6	Arthropathies 8.5
Dementia/Alzheimers 0.5	Osteopathies 2.1
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 2.1	Ill-Defined Cond. 3.2
Paralysis/CP 2.1	Fractures 4.8
Cardiovascular 15.3	Wounds, Burns 1.6
Stroke 1.1	Compl. of Surgery 5.3
Respiratory 5.8	Other Conditions 19.0

**REVENUE**

Billings \$	922,458
Disallowances	138,063
Collections	784,395
Other	0
Total	784,395

**EXPENSES**

Total \$	775,998
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.4
Registered Nurses	2.0
Licensed Practical Nurses	1.0
Home Health Aides	1.7
Physical Therapists	0.5
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	7.4

**Hiawatha Homecare**

1610 West 3rd Street  
Red Wing MN 55066

Out of State

**COUNTIES SERVED**

Pierce  
St. Croix

(651) 388-2223

License Number: 340

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 9

**TOTAL NUMBER OF ADMISSIONS** 4

**PERCENT ADMISSIONS FROM:**

Private Residences	75.0%
General Hospitals	25.0
Nursing Homes	0.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 7

**PERCENT DISCHARGES TO:**

Private Residences	85.7%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	14.3
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	5	37	7.4
Home Health Aide	2	138	69.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	4	1,491	372.8
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,666	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 22.2%	Medicare 0.0%
4 to 34 33.3	Medicaid 33.3
35 to 54 0.0	Other Federal 0.0
55 to 64 33.3	State Funds 0.0
65 to 74 11.1	Private Insurance 33.3
75 to 84 0.0	Self Pay 11.1
85 & over 0.0	Other 22.2
	TOTAL PATIENTS 9

Males 55.6% Females 44.4 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 11.1%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 22.2
Central Nervous Sys. 22.2	Ill-Defined Cond. 11.1
Paralysis/CP 0.0	Fractures 11.1
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 22.2	Other Conditions 0.0

**REVENUE**

Billings \$	758,675
Disallowances	339,575
Collections	419,100
Other	0
Total	419,100

**EXPENSES**

Total \$	276,242
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	2.1
Licensed Practical Nurses	1.5
Home Health Aides	0.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	4.2



**Red Wing Regional Home Health**

1407 West 4th Street, Box 134

Red Wing MN 55066

Out of State

**COUNTIES SERVED**

Pierce

(651) 385-3410

License Number: 215

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of unduplicated patients in 2003 = 38

**TOTAL NUMBER OF ADMISSIONS** 40**PERCENT ADMISSIONS FROM:**

Private Residences	7.5%
General Hospitals	75.0
Nursing Homes	12.5
Other	5.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 42

**PERCENT DISCHARGES TO:**

Private Residences	73.8%
General Hospitals	9.5
Nursing Homes	7.1
Deaths	2.4
Other	7.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	34	219	6.4
Home Health Aide	15	372	24.8
Physical Therapy	14	73	5.2
Spch/Occ/Resp Therapy	8	86	10.8
Medical Social Service	1	1	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	4	75	18.8
TOTAL	XXXXXXX	826	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.6%	Medicare 42.5%
4 to 34 10.5	Medicaid 2.5
35 to 54 18.4	Other Federal 0.0
55 to 64 13.2	State Funds 0.0
65 to 74 13.2	Private Insurance 25.0
75 to 84 31.6	Self Pay 15.0
85 & over 10.5	Other 15.0
	TOTAL PATIENTS 40

Males 44.7% Females 55.3 %

PRIMARY DIAGNOSIS	
Infectious Disorders 7.9%	Digestive Disorders 10.5%
Cancer 10.5	Genitourinary Sys. 0.0
Diabetes 5.3	Preg. & Childbirth 0.0
Diseases of Blood 2.6	Arthropathies 10.5
Dementia/Alzheimers 0.0	Osteopathies 2.6
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 7.9	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 7.9
Cardiovascular 15.8	Wounds, Burns 2.6
Stroke 2.6	Compl. of Surgery 7.9
Respiratory 2.6	Other Conditions 2.6

**REVENUE**

Billings \$	86,925
Disallowances	6,858
Collections	80,067
Other	8,787
Total	88,854

**EXPENSES**

Total \$	101,049
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTES	0.3

**Interim Healthcare - Rockford**

5411 East State Street, Suite 212

Rockford IL 61108

Out of State

**COUNTIES SERVED**

Rock

(815) 399-8686

License Number: 248

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 13

**TOTAL NUMBER OF ADMISSIONS** 12**PERCENT ADMISSIONS FROM:**

Private Residences	16.7%
General Hospitals	75.0
Nursing Homes	8.3
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 10

**PERCENT DISCHARGES TO:**

Private Residences	90.0%
General Hospitals	10.0
Nursing Homes	0.0
Deaths	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	6	153	25.5
Home Health Aide	1	1	1.0
Physical Therapy	5	130	26.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	6	1,077	179.5
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,361	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 15.4%	Medicare 21.4%
4 to 34 30.8	Medicaid 28.6
35 to 54 30.8	Other Federal 0.0
55 to 64 23.1	State Funds 0.0
65 to 74 0.0	Private Insurance 42.9
75 to 84 0.0	Self Pay 7.1
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 14

Males 46.2% Females 53.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 7.7	Ill-Defined Cond. 7.7
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 23.1	Wounds, Burns 15.4
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 7.7	Other Conditions 38.5

**REVENUE**

Billings \$	419,868
Disallowances	104,286
Collections	315,582
Other	0
Total	315,582

**EXPENSES**

Total \$	284,597
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**STAFFING****FTES**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	5.1
Licensed Practical Nurses	1.1
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.1
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.3
TOTAL FTES	8.5

**Gentiva Health Services**

1970 Oakcrest Avenue, Suite 107

Roseville MN 55113

Out of State

(651) 636-6330

License Number: 211

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 67

**COUNTIES SERVED**

Buffalo

Chippewa

Dunn

Eau Claire

Pepin

Pierce

St. Croix

Trempealeau

**TOTAL NUMBER OF ADMISSIONS** 40**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	20.0
Nursing Homes	10.0
Other	70.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 59

**PERCENT DISCHARGES TO:**

Private Residences	59.3%
General Hospitals	1.7
Nursing Homes	0.0
Deaths	0.0
Other	39.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	47	618	13.1
Home Health Aide	5	147	29.4
Physical Therapy	2	7	3.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	48	10,178	212.0
Other Home Health Care	43	94	2.2
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,044	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 6.0%	Medicare 10.5%
4 to 34 35.8	Medicaid 38.2
35 to 54 19.4	Other Federal 0.0
55 to 64 17.9	State Funds 0.0
65 to 74 0.0	Private Insurance 38.2
75 to 84 9.0	Self Pay 11.8
85 & over 11.9	Other 1.3
	TOTAL PATIENTS 76

Males 46.3% Females 53.7 %

PRIMARY DIAGNOSIS	
Infectious Disorders 1.5%	Digestive Disorders 0.0%
Cancer 3.0	Genitourinary Sys. 1.5
Diabetes 4.5	Preg. & Childbirth 6.0
Diseases of Blood 0.0	Arthropathies 3.0
Dementia/Alzheimers 0.0	Osteopathies 1.5
Psychoses/Neuroses 1.5	Perinatal Period 1.5
Central Nervous Sys. 16.4	Ill-Defined Cond. 7.5
Paralysis/CP 3.0	Fractures 3.0
Cardiovascular 13.4	Wounds, Burns 6.0
Stroke 1.5	Compl. of Surgery 6.0
Respiratory 0.0	Other Conditions 19.4

**REVENUE**

Billings \$	865,021
Disallowances	126,015
Collections	739,006
Other	0
Total	739,006

**EXPENSES**

Total \$	775,228
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**STAFFING****FTES**

Administrators	0.2
Reg. Nurse Supervisors	0.3
Registered Nurses	3.0
Licensed Practical Nurses	2.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.2
TOTAL FTES	7.7

**Gentiva Health Services**

1970 Oakcrest Avenue, Suite 107

Roseville MN 55113

Out of State

(651) 636-6330

License Number: 286

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 39

**COUNTIES SERVED**

Chippewa

Dunn

Eau Claire

Pierce

St. Croix

Trempealeau

**TOTAL NUMBER OF ADMISSIONS** 17**PERCENT ADMISSIONS FROM:**

Private Residences	0.0%
General Hospitals	17.6
Nursing Homes	35.3
Other	47.1

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 33

**PERCENT DISCHARGES TO:**

Private Residences	30.3%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	69.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	21	1,421	67.7
Home Health Aide	4	165	41.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	17	1,819	107.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,405	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 7.7%	Medicare 0.0%
4 to 34 51.3	Medicaid 0.0
35 to 54 12.8	Other Federal 0.0
55 to 64 15.4	State Funds 0.0
65 to 74 0.0	Private Insurance 86.0
75 to 84 2.6	Self Pay 14.0
85 & over 10.3	Other 0.0
	TOTAL PATIENTS 43

Males 46.2% Females 53.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 2.6%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 2.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 2.6
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 2.6
Central Nervous Sys. 25.6	Ill-Defined Cond. 5.1
Paralysis/CP 5.1	Fractures 7.7
Cardiovascular 12.8	Wounds, Burns 2.6
Stroke 2.6	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 28.2

**REVENUE**

Billings \$	18,528
Disallowances	729
Collections	17,799
Other	0
Total	17,799

**EXPENSES**

Total \$	18,685
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.5
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	1.7

**Lakeview Hospital Homecare**

5610 Norwich Parkway  
Stillwater MN 55082

Out of State

**COUNTIES SERVED**

Polk  
St. Croix

(651) 430-3320

License Number: 260

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 188

**TOTAL NUMBER OF ADMISSIONS** 172

**PERCENT ADMISSIONS FROM:**

Private Residences	30.2%
General Hospitals	62.8
Nursing Homes	7.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 168

**PERCENT DISCHARGES TO:**

Private Residences	75.0%
General Hospitals	7.7
Nursing Homes	10.1
Deaths	4.8
Other	2.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	139	1,198	8.6
Home Health Aide	31	1,388	44.8
Physical Therapy	53	259	4.9
Spch/Occ/Resp Therapy	14	55	3.9
Medical Social Service	2	5	2.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	211	105.5
TOTAL	XXXXXXX	3,116	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 46.8%
4 to 34 11.7	Medicaid 2.1
35 to 54 17.0	Other Federal 0.0
55 to 64 11.2	State Funds 0.0
65 to 74 14.4	Private Insurance 47.9
75 to 84 19.7	Self Pay 2.1
85 & over 25.5	Other 1.1
	TOTAL PATIENTS 188

Males 45.2% Females 54.8 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 4.3%
Cancer 0.0	Genitourinary Sys. 4.3
Diabetes 0.0	Preg. & Childbirth 2.1
Diseases of Blood 0.0	Arthropathies 11.7
Dementia/Alzheimers 0.0	Osteopathies 11.7
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 44.7	Wounds, Burns 4.3
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 14.9	Other Conditions 2.1

**REVENUE**

Billings \$	382,585
Disallowances	74,591
Collections	307,994
Other	0
Total	307,994

**EXPENSES**

Total \$	232,081
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**STAFFING****FTES**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	2.3
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTES	7.6

**St. Elizabeth Home Health Care**

1200 West 5th Grant Boulevard

Wabasha MN 55981

Out of State

**COUNTIES SERVED**

Buffalo

Pepin

(651) 565-5577

License Number: 356

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 28

**TOTAL NUMBER OF ADMISSIONS** 27**PERCENT ADMISSIONS FROM:**

Private Residences	14.8%
General Hospitals	70.4
Nursing Homes	11.1
Other	3.7

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 28

**PERCENT DISCHARGES TO:**

Private Residences	42.9%
General Hospitals	35.7
Nursing Homes	10.7
Deaths	3.6
Other	7.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	24	438	18.3
Home Health Aide	11	283	25.7
Physical Therapy	8	18	2.3
Spch/Occ/Resp Therapy	3	9	3.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	13	210	16.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	1	5	5.0
TOTAL	XXXXXXX	963	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 37.1%
4 to 34 0.0	Medicaid 31.4
35 to 54 3.6	Other Federal 0.0
55 to 64 28.6	State Funds 0.0
65 to 74 17.9	Private Insurance 11.4
75 to 84 25.0	Self Pay 20.0
85 & over 25.0	Other 0.0
	TOTAL PATIENTS 35

Males 25.0% Females 75.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 14.3	Genitourinary Sys. 0.0
Diabetes 10.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 7.1
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 3.6
Paralysis/CP 0.0	Fractures 3.6
Cardiovascular 35.7	Wounds, Burns 3.6
Stroke 3.6	Compl. of Surgery 7.1
Respiratory 3.6	Other Conditions 7.1

**REVENUE**

Billings \$	52,564
Disallowances	8,186
Collections	44,378
Other	0
Total	44,378

**EXPENSES**

Total \$	49,962
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**STAFFING****FTES**

Administrators	0.0
Reg. Nurse Supervisors	0.1
Registered Nurses	0.1
Licensed Practical Nurses	0.1
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	1.0
TOTAL FTES	1.6

**Winona Health Home Care**

175 East Wabasha Street  
Winona MN 55987

Out of State

**COUNTIES SERVED**

Buffalo  
Trempealeau

(507) 457-4468

License Number: 318

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 25

**TOTAL NUMBER OF ADMISSIONS** 22

**PERCENT ADMISSIONS FROM:**

Private Residences	9.1%
General Hospitals	22.7
Nursing Homes	18.2
Other	50.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 24

**PERCENT DISCHARGES TO:**

Private Residences	66.7%
General Hospitals	29.2
Nursing Homes	0.0
Deaths	0.0
Other	4.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	16	167	10.4
Home Health Aide	14	260	18.6
Physical Therapy	9	118	13.1
Spch/Occ/Resp Therapy	6	57	9.5
Medical Social Service	0	0	0.0
Private Duty Nursing	3	25	8.3
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	35	17.5
TOTAL	XXXXXXX	662	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 60.7%
4 to 34 0.0	Medicaid 7.1
35 to 54 8.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 24.0	Private Insurance 14.3
75 to 84 44.0	Self Pay 14.3
85 & over 24.0	Other 3.6
	TOTAL PATIENTS 28

Males 32.0% Females 68.0 %

PRIMARY DIAGNOSIS	
Infectious Disorders 4.0%	Digestive Disorders 0.0%
Cancer 4.0	Genitourinary Sys. 4.0
Diabetes 12.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 4.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 4.0	Perinatal Period 0.0
Central Nervous Sys. 4.0	Ill-Defined Cond. 8.0
Paralysis/CP 0.0	Fractures 12.0
Cardiovascular 8.0	Wounds, Burns 0.0
Stroke 16.0	Compl. of Surgery 0.0
Respiratory 12.0	Other Conditions 8.0

**REVENUE**

Billings \$	68,905
Disallowances	13,115
Collections	55,790
Other	0
Total	55,790

**EXPENSES**

Total \$	51,340
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**STAFFING****FTES**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTES	0.5

**Caregivers Home Health**

1037 Lake Avenue  
Woodstock IL 60098

Out of State

(800) 338-0477

**COUNTIES SERVED**

Kenosha  
Racine  
Rock  
Walworth

License Number: 257

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of unduplicated patients in 2003 = 53

**TOTAL NUMBER OF ADMISSIONS** 30

**PERCENT ADMISSIONS FROM:**

Private Residences	86.7%
General Hospitals	13.3
Nursing Homes	0.0
Other	0.0

**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 26

**PERCENT DISCHARGES TO:**

Private Residences	80.8%
General Hospitals	15.4
Nursing Homes	0.0
Deaths	3.8
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	40	92	2.3
Home Health Aide	3	1,450	483.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	12	2,345	195.4
Personal Care/PC RN Supv.	56	4,052	72.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,939	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 17.0%	Medicare 0.0%
4 to 34 35.8	Medicaid 95.5
35 to 54 22.6	Other Federal 0.0
55 to 64 11.3	State Funds 0.0
65 to 74 1.9	Private Insurance 0.0
75 to 84 9.4	Self Pay 0.0
85 & over 1.9	Other 4.5
	TOTAL PATIENTS 66

Males 22.6% Females 77.4 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.9%	Digestive Disorders 0.0%
Cancer 3.8	Genitourinary Sys. 0.0
Diabetes 5.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 1.9
Dementia/Alzheimers 1.9	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 3.8
Central Nervous Sys. 11.3	Ill-Defined Cond. 3.8
Paralysis/CP 18.9	Fractures 1.9
Cardiovascular 5.7	Wounds, Burns 0.0
Stroke 5.7	Compl. of Surgery 0.0
Respiratory 3.8	Other Conditions 30.2

**REVENUE**

Billings \$	1,081,781
Disallowances	309,733
Collections	772,048
Other	0
Total	772,048

**EXPENSES**

Total \$	775,250
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**STAFFING****FTES**

Administrators	0.3
Reg. Nurse Supervisors	0.5
Registered Nurses	0.4
Licensed Practical Nurses	3.0
Home Health Aides	2.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.4
TOTAL FTES	6.8



**STATE OF WISCONSIN TOTALS**

Number of unduplicated patients in 2003 = 69,746

**TOTAL NUMBER OF ADMISSIONS** 63,058

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	57,627	723,806	12.6
Home Health Aide	15,935	522,498	32.8
Physical Therapy	26,381	190,681	7.2
Spch/Occ/Resp Therapy	10,880	67,747	6.2
Medical Social Service	4,654	9,341	2.0
Private Duty Nursing	332	46,196	139.1
Personal Care/PC RN Supv.	13,360	1,725,992	129.2
Other Home Health Care	530	7,369	13.9
Homemkr & Other Non HH	1,576	150,614	95.6
TOTAL	XXXXXX	3,444,244	XXXXX

**PERCENT ADMISSIONS FROM:**

Private Residences	25.8%
General Hospitals	59.4
Nursing Homes	7.7
Other	7.1

**TOTAL NUMBER OF DISCHARGES**

(INCLUDING DEATHS) 62,429

**PERCENT DISCHARGES TO:**

Private Residences	77.9
General Hospitals	7.5
Nursing Homes	4.2
Deaths	2.5
Other	7.9

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 6.4	Medicare 54.6%
4 to 34 6.4	Medicaid 15.4
35 to 54 13.1	Other Federal 0.2
55 to 64 11.1	State Funds 1.3
65 to 74 16.9	Priv. Insurance 23.2
75 to 84 26.8	Self Pay 3.6
85 & over 19.2	Other 1.8
	TOTAL PATIENTS 73,552

Males 39.9 % Females 60.1 %

**PRIMARY DIAGNOSIS**

Infectious Disorders 1.0%	Digestive Disorders 3.7%
Cancer 6.9	Genitourinary Sys. 2.7
Diabetes 4.4	Preg. & Childbirth 0.2
Diseases of Blood 1.1	Arthropathies 11.6
Dementia/Alzheimers 0.7	Osteopathies 2.3
Psychoses/Neuroses 1.5	Perinatal Period 4.8
Central Nervous Sys. 3.0	Ill-Defined Cond. 7.3
Paralysis/CP 1.5	Fractures 4.8
Cardiovascular 14.1	Wounds, Burns 2.6
Stroke 3.0	Compl. of Surgery 3.6
Respiratory 5.3	Other Conditions 13.8

**REVENUE**

Billings	\$251,528,418
Disallowances	41,622,800
Collections	209,905,618
Other	3,534,483
Total	213,440,101

**EXPENSES**

Total \$223,475,924

**STAFFING****FTES**

Administrators	122.6
Reg. Nurse Supervisors	202.1
Registered Nurses	939.8
Licensed Practical Nurses	142.4
Home Health Aides	796.1
Physical Therapists	156.6
Occupational Therapists	46.0
Speech Pathologists	9.1
Respiratory Therapists	12.0
Medical Social Workers	49.3
Other Therapeutic Staff	15.1
Personal Care Workers	1248.9
Homemakers	158.2
Other Staff	783.0
TOTAL FTES	4681.1



## **Indices of Home Health Agency Profiles**



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103	100	Rusk County Department of Health & Human Services	Ladysmith	Rusk
104	128	Heartland Home Health	Baldwin	St. Croix
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106	102	Sauk County Health Department	Baraboo	Sauk
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109	124	St. Nicholas Hospital Home Health & Hospice	Sheboygan	Sheboygan
110	107	Trempealeau County Health Department	Whitehall	Trempealeau
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112	125	Home Care Network	Lake Geneva	Walworth
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114	324	Indianhead Medical Center Inc., Home Health Agency	Shell Lake	Washburn
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116	1024	Heartland Home Health Care and Hospice	West Bend	Washington
117	280	Heartland Home Health Care & Hospice	Brookfield	Waukesha
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119	1009	Universal Pediatric Services, Inc.	Brookfield	Waukesha
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142	340	Hiaawatha Homecare	Red Wing	Out of State
143	215	Red Wing Regional Home Health	Red Wing	Out of State
144	248	Interim Healthcare - Rockford	Rockford	Out of State
145	211	Gentiva Health Services	Roseville	Out of State
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147	260	Lakeview Hospital Homecare	Stillwater	Out of State
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21	294	Independent Health Care, Inc.	Madison	Dane
102	295	Indianhead Home Health Care Agency	Ladysmith	Rusk
114	324	Indianhead Medical Center Inc., Home Health Agency	Shell Lake	Washburn
59	277	Interim Healthcare	Wausau	Marathon
134	284	Interim Healthcare - Lake Superior	Duluth	Out of State
144	248	Interim Healthcare - Rockford	Rockford	Out of State
22	206	Interim Healthcare of Madison	Madison	Dane
8	266	Interim Healthcare of Northeastern Wisconsin, Inc.	Green Bay	Brown
46	63	Jefferson County Health Department	Jefferson	Jefferson
47	135	KJM Home Health Care Agency	Watertown	Jefferson
49	65	Kenosha VNA, Inc.	Kenosha	Kenosha
118	1022	LS Professional Comfort Homes, Inc.	Brookfield	Waukesha
54	66	La Crosse County Health Department	La Crosse	La Crosse
70	147	Laabs Home Health Care, Inc.	Milwaukee	Milwaukee
55	68	Lafayette County Nursing Agency	Darlington	Lafayette
147	260	Lakeview Hospital Homecare	Stillwater	Out of State
3	151	Lakeview Medical Center	Rice Lake	Barron
56	69	Langlade County Health Department	Antigo	Langlade
34	335	Lifenet, LLC	Eau Claire	Eau Claire
124	220	Lutheran Social Services Home Care	Waukesha	Waukesha
27	134	Marquardt Memorial Manor, Inc.	Watertown	Dodge
141	207	Marquette General Home Health & Hospice	Kingsford	Out of State
71	1029	Maxim Healthcare Services, Inc.	Milwaukee	Milwaukee
100	159	Memorial Community Hospital Home Health Agency	Edgerton	Rock
16	146	Memorial Hospital, Inc.	Neillsville	Clark
101	99	Mercy Assisted Care, Inc.	Janesville	Rock
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132	182	Ministry Home Care Home Health - Marshfield	Marshfield	Wood
87	253	Ministry Home Care Home Health - Rhinelander	Rhinelander	Oneida
35	1010	Mission Home Health - Lutheran Social Services	Eau Claire	Eau Claire
85	83	Monroe County Health Department	Sparta	Monroe
1	139	Moundview Memorial Hospital and Clinics, Inc.	Adams	Adams
63	241	Northland Home Health Agency	Westfield	Marquette
62	256	Northland Lutheran Home Health Services, Inc.	Marinette	Marinette
36	127	Northwest Wisconsin Homecare, Inc.	Eau Claire	Eau Claire
78	225	Nursing Consultation and Care Management, Inc.	Shorewood	Milwaukee
123	1025	Oconomowoc Home Health Care, LLC	Oconomowoc	Waukesha
88	89	Ozaukee County Public Health Department	Port Washington	Ozaukee
89	90	Pepin County Nursing Service	Durand	Pepin
90	91	Pierce County Home Care	Ellsworth	Pierce
44	219	Pine View Home Health	Black River Falls	Jackson
92	92	Polk County Home Care Program	Balsam Lake	Polk
18	46	Prairie du Chien Memorial Hospital Home Health	Prairie du Chien	Crawford
127	157	Preferred Home Health Care, Inc.	Menasha	Winnebago
74	278	Preferred Home Health Services, LLC	Milwaukee	Milwaukee
84	279	Professional Home Care Service	West Allis	Milwaukee
120	170	Prohealth Home Care, Inc.	Hartland	Waukesha
75	1023	Quality Assurance Home Health Services	Milwaukee	Milwaukee
126	24	REM Health of Wisconsin, Inc	Waupaca	Waupaca
105	36	REM Health of Wisconsin, Inc.	Baraboo	Sauk
143	215	Red Wing Regional Home Health	Red Wing	Out of State
65	1032	Regal Home Health Services, Inc.	Brown Deer	Milwaukee
103	100	Rusk County Department of Health & Human Services	Ladysmith	Rusk
97	305	Sai Home Health Care, Inc.	Racine	Racine
106	102	Sauk County Health Department	Baraboo	Sauk
107	103	Sawyer County Health and Human Services	Hayward	Sawyer
108	104	Shawano Community Home Care	Shawano	Shawano
115	208	Spooner Health System Home Care	Spooner	Washburn
91	349	Spring Valley Home Health Services	Spring Valley	Pierce
38	55	St. Agnes Hospital - Home Care Services	Fond du Lac	Fond du Lac
148	356	St. Elizabeth Home Health Care	Wabasha	Out of State
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15	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
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109	124	St. Nicholas Hospital Home Health & Hospice	Sheboygan	Sheboygan
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128	88	Thedacare at Home	Neenah	Winnebago
110	107	Trempealeau County Health Department	Whitehall	Trempealeau
139	1013	United Home Care	Iron River	Out of State
119	1009	Universal Pediatric Services, Inc.	Brookfield	Waukesha
24	252	University Hospital Home Health Agency	Middleton	Dane
43	60	Upland Hills Home Care	Dodgeville	Iowa
60	73	VNA Home Health, Inc.	Wausau	Marathon
111	271	Vernon Memorial Hospital Home Health Care Agency	Viroqua	Vernon
10	1008	Visiting Nurse Association of Wisconsin	Green Bay	Brown
76	81	Visiting Nurse Association of Wisconsin	Milwaukee	Milwaukee
28	165	Watertown Memorial Hospital - Home Health Program	Watertown	Dodge
149	318	Winona Health Home Care	Winona	Out of State
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72	23	Metro Home Health Services, Inc.	Milwaukee	Milwaukee
126	24	REM Health of Wisconsin, Inc	Waupaca	Waupaca
93	27	Community Health Resources	Park Falls	Price
9	35	St. Vincent Hospital Home Health Care	Green Bay	Brown
105	36	REM Health of Wisconsin, Inc.	Baraboo	Sauk
12	41	Burnett County Department of Health and Human Services	Siren	Burnett
13	42	Calumet County Health Dept/Home Health Care Agency	Chilton	Calumet
14	43	Chippewa County Department/Public Health	Chippewa Falls	Chippewa
18	46	Prairie du Chien Memorial Hospital Home Health	Prairie du Chien	Crawford
30	50	Douglas County Health Department - Home Health Care	Superior	Douglas
33	51	Dunn County Home Health Care	Menomonie	Dunn
138	53	Dickinson - Iron District Health Department	Iron River	Out of State
37	54	Fond du Lac Co Home Health Service	Fond du Lac	Fond du Lac
38	55	St. Agnes Hospital - Home Care Services	Fond du Lac	Fond du Lac
39	57	Grant County Home Nursing Service	Lancaster	Grant
43	60	Upland Hills Home Care	Dodgeville	Iowa
46	63	Jefferson County Health Department	Jefferson	Jefferson
49	65	Kenosha VNA, Inc.	Kenosha	Kenosha
54	66	La Crosse County Health Department	La Crosse	La Crosse
55	68	Lafayette County Nursing Agency	Darlington	Lafayette
56	69	Langlade County Health Department	Antigo	Langlade
60	73	VNA Home Health, Inc.	Wausau	Marathon
76	81	Visiting Nurse Association of Wisconsin	Milwaukee	Milwaukee
85	83	Monroe County Health Department	Sparta	Monroe
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88	89	Ozaukee County Public Health Department	Port Washington	Ozaukee
89	90	Pepin County Nursing Service	Durand	Pepin
90	91	Pierce County Home Care	Ellsworth	Pierce
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101	99	Mercy Assisted Care, Inc.	Janesville	Rock
103	100	Rusk County Department of Health & Human Services	Ladysmith	Rusk
106	102	Sauk County Health Department	Baraboo	Sauk
107	103	Sawyer County Health and Human Services	Hayward	Sawyer
108	104	Shawano Community Home Care	Shawano	Shawano
110	107	Trempealeau County Health Department	Whitehall	Trempealeau
79	122	Anew Home Health Care	Wauwatosa	Milwaukee
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50	130	Alliance Home Care	Pleasant Prairie	Kenosha
27	134	Marquardt Memorial Manor, Inc.	Watertown	Dodge
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1	139	Moundview Memorial Hospital and Clinics, Inc.	Adams	Adams
52	141	Franciscan Skemp Medical Center HHS	La Crosse	La Crosse
41	142	The Monroe Clinic Home Care	Monroe	Green
57	143	Holy Family Memorial Home Care	Manitowoc	Manitowoc
129	144	Affinity Visiting Nurses	Oshkosh	Winnebago
16	146	Memorial Hospital, Inc.	Neillsville	Clark
70	147	Laabs Home Health Care, Inc.	Milwaukee	Milwaukee
80	148	Camillus Cares Home Health	Wauwatosa	Milwaukee
64	150	Horizon Home Care & Hospice	Brown Deer	Milwaukee
3	151	Lakeview Medical Center	Rice Lake	Barron
7	154	Home Care Advantage, Inc.	Green Bay	Brown
127	157	Preferred Home Health Care, Inc.	Menasha	Winnebago
15	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
100	159	Memorial Community Hospital Home Health Agency	Edgerton	Rock
28	165	Watertown Memorial Hospital - Home Health Program	Watertown	Dodge
135	169	St. Luke's Home Health Service	Duluth	Out of State
120	170	Prohealth Home Care, Inc.	Hartland	Waukesha
31	172	The Dove, Inc.	Superior	Douglas
136	175	St. Mary's Home Health	Duluth	Out of State
20	176	Home Health United - VNS	Madison	Dane
69	179	Covenant Home Health and Hospice, Inc.	Milwaukee	Milwaukee
132	182	Ministry Home Care Home Health - Marshfield	Marshfield	Wood
29	187	Door County Memorial Home Health	Sturgeon Bay	Door
26	188	Hillside Home Health	Beaver Dam	Dodge
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141	207	Marquette General Home Health & Hospice	Kingsford	Out of State
115	208	Spooner Health System Home Care	Spooner	Washburn
145	211	Gentiva Health Services	Roseville	Out of State
130	214	Clarity Care, Inc.	Oshkosh	Winnebago
143	215	Red Wing Regional Home Health	Red Wing	Out of State
48	216	Hess Home Health	Mauston	Juneau
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95	238	Flambeau Home Health & Hospice	Phillips	Price
121	240	Hannah Home Health Care, Inc.	Mukwonago	Waukesha
63	241	Northland Home Health Agency	Westfield	Marquette
122	247	Coram Alternate Site Services, Inc.	New Berlin	Waukesha
144	248	Interim Healthcare - Rockford	Rockford	Out of State
2	251	Bay Area Health LLC	Ashland	Ashland
24	252	University Hospital Home Health Agency	Middleton	Dane
87	253	Ministry Home Care Home Health - Rhinelander	Rhineland	Oneida
62	256	Northland Lutheran Home Health Services, Inc.	Marinette	Marinette
150	257	Caregivers Home Health	Woodstock	Out of State
147	260	Lakeview Hospital Homecare	Stillwater	Out of State
8	266	Interim Healthcare of Northeastern Wisconsin, Inc.	Green Bay	Brown
111	271	Vernon Memorial Hospital Home Health Care Agency	Viroqua	Vernon
59	277	Interim Healthcare	Wausau	Marathon
74	278	Preferred Home Health Services, LLC	Milwaukee	Milwaukee
84	279	Professional Home Care Service	West Allis	Milwaukee
117	280	Heartland Home Health Care & Hospice	Brookfield	Waukesha
134	284	Interim Healthcare - Lake Superior	Duluth	Out of State
146	286	Gentiva Health Services	Roseville	Out of State
83	287	Gentiva Health Services	West Allis	Milwaukee
21	294	Independent Health Care, Inc.	Madison	Dane
102	295	Indianhead Home Health Care Agency	Ladysmith	Rusk
125	300	St. Joseph Home Care	New London	Waupaca
113	304	Hearts of Gold, Inc.	Shell Lake	Washburn
97	305	Sai Home Health Care, Inc.	Racine	Racine
81	306	ANS Home Health Services, Inc.	West Allis	Milwaukee
73	309	Midamerica Healthcare Corporation of Wisconsin	Milwaukee	Milwaukee
32	310	Aurora Community Health, Inc.	Menomonie	Dunn
11	311	Woodside Home Health Agency	Green Bay	Brown
77	312	"Your Nurse" Home Health Care, Inc.	Milwaukee	Milwaukee
137	314	Dickinson Home Health	Iron Mountain	Out of State
19	316	Catalyst, Inc.	Madison	Dane
149	318	Winona Health Home Care	Winona	Out of State
114	324	Indianhead Medical Center Inc., Home Health Agency	Shell Lake	Washburn
67	326	Affiliated Home Health Care, Inc.	Milwaukee	Milwaukee
17	328	Divine Savior Home Care	Portage	Columbia
40	330	Homeward Bound Home Health	Lancaster	Grant
34	335	Lifenet, LLC	Eau Claire	Eau Claire
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10	1008	Visiting Nurse Association of Wisconsin	Green Bay	Brown
119	1009	Universal Pediatric Services, Inc.	Brookfield	Waukesha
35	1010	Mission Home Health - Lutheran Social Services	Eau Claire	Eau Claire
139	1013	United Home Care	Iron River	Out of State
98	1015	Accura Home Health	Avalon	Rock
86	1017	The Woodlands Home Health	Suring	Oconto
118	1022	LS Professional Comfort Homes, Inc.	Brookfield	Waukesha
75	1023	Quality Assurance Home Health Services	Milwaukee	Milwaukee
116	1024	Heartland Home Health Care and Hospice	West Bend	Washington
123	1025	Oconomowoc Home Health Care, LLC	Oconomowoc	Waukesha
53	1027	Gundersen Lutheran Medical Center, Inc.	La Crosse	La Crosse
51	1028	Caregivers La Crosse, Inc.	La Crosse	La Crosse
71	1029	Maxim Healthcare Services, Inc.	Milwaukee	Milwaukee
66	1031	Aedon Homecare, LLC	Greenfield	Milwaukee
65	1032	Regal Home Health Services, Inc.	Brown Deer	Milwaukee